

CLAUDE INDEPENDENT SCHOOL DISTRICT INCENTIVES REQUEST/APPROVAL

SECTION A - REQUEST/APPROVAL

Campus: _____ Date: _____

Club: _____ Sponsor: _____

Purpose: _____

Is this merchandise left over from a fundraising activity? Yes No

If yes*, specify which fundraiser, and the date held: _____

* Attach a copy of this form to the appropriate fund raiser "Final Report" and count this as an expense.

LIST ITEMS REQUESTED BELOW:

QUANTITY	PRICE PER ITEM	DESCRIPTION (i.e. ice cream, t-shirts, etc.)	TOTAL

APPROVED: Yes No Principal's Signature: _____

SECTION B - STUDENT SIGNATURES

	Name	Item Received	Signature
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			

---Please attach a separate sheet of paper if more room is necessary.---