

APPROVAL FORM: FUNDRAISERS FOR SCHOOL ACTIVITIES AND PROGRAMS

School / Department: _____

Date / time period of fundraiser: _____

How, when and where will the fundraiser be conducted? _____

Method for collecting money? (check all that apply)

- Payments will be collected by the finance secretary at the school's office
- Someone will provide receipts as instructed by the finance secretary
- Two people will collect money together as instructed by the finance secretary
- Other (provide details below)

As the person overseeing this fundraiser, I agree to abide by the District's financial policies and procedures as communicated to me by my supervisor, principal, or school finance secretary. I acknowledge the fundraiser proceeds must be deposited in the school's account, or remitted to the finance secretary, as soon as possible.

Name (print)

Signature

Date

This section to be completed by a school administrator

Authorized by:

Name (print)

Signature

Date

Notes / instructions:
