

SALES PROJECT APPROVAL FORM

The purpose of this form is to show that student activity fundraising is functioning in accordance with board policy and state accounting procedures.

\*\* COMPLETE PRIOR TO BEGINNING ANY FUNDRAISING \*\*  
\*\* PROJECT/EVENT MUST BE ON PURPOSE AND BUDGET \*\*

Organization: \_\_\_\_\_

Fund: \_\_\_\_\_ SCC: \_\_\_\_\_

Proposed Sales Project/Event: \_\_\_\_\_

Event Location: \_\_\_\_\_

Dates: \_\_\_\_\_

ORDERING INFORMATION

Company: \_\_\_\_\_

Quantity: \_\_\_\_\_ Cost: \_\_\_\_\_

Anticipated Revenue: \_\_\_\_\_ Fee to be Charged: \_\_\_\_\_

Please use the space below to give details such as purpose of project, procedures in carrying out project, school facilities needed (if any) and who will be solicited (for sales/donations) also, attach a list of participating students.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Advisor Signature Date

\_\_\_\_\_  
Principal Signature Date

\_\_\_\_\_  
Athletic Director Date

\_\_\_\_\_  
Treasurer Date

\_\_\_\_\_  
Superintendent Date