

FUND RAISER APPROVAL FORM

1. NAME _____ DATE _____
THIS ORGANIZATION _____
2. REASON FOR SALE (PROPOSED USE OF FUNDS) _____

3. NAME OF SALES REPRESENTATIVE _____
4. NAME AND ADDRESS OF COMPANY SELECTED _____

5. PRODUCT(S) TO BE SOLD (BE SPECIFIC) _____

6. COST PER ITEM/SELLING PRICE PER ITEM _____
7. PERCENTAGE OF PROFIT ON EACH ITEM _____ (MINIMUM OF 40% REQUIRED. ANY EXCEPTION MUST BE APPROVED IN WRITING PRIOR TO COMMITMENT TO VENDOR)
8. ARE THERE PRIZES OR AN INCENTIVE PROGRAM? YES _____ NO _____
EXPLAIN _____
9. NAME(S) OF PERSON(S) RESPONSIBLE FOR DEPOSITING MONIES _____

10. LIST PROCEDURE FOR COLLECTING, COUNTING, AND DEPOSITING MONIES _____

11. PERSONS SELLING DIRECTLY: PUPILS _____ PARENTS _____ BOTH _____
12. IS THERE A REFUND POLICY FOR BOTH DAMAGED GOODS AND OVER-ZEALOUS BUYING?
YES _____ NO _____ IF NO, WHY NOT? _____
13. LIST ALL VENDORS INTERVIEWED _____

ATTACH QUOTES FROM VENDORS. QUOTES MUST BE SPECIFIC AS TO TYPE OF PRODUCT QUOTED. FOOD VENDORS MUST PROVIDE INFORMATION ON INGREDIENTS AND PRODUCT QUALITY.
14. WILL THERE BE A CONTRACT? YES _____ NO _____ IF NO, WHY NOT? _____

APPROVAL SIGNATURES:

FUND RAISING CHAIRPERSON _____ DATE _____
PRINCIPAL _____ DATE _____
SUPERINTENDENT _____ DATE _____

PLEASE ATTACH ANY PERTINENT INFORMATION