

GENESEE SCHOOL DISTRICT
REQUEST FOR FUNDRAISER ACTIVITY

The Principal or Athletic Director and the Superintendent must sign this form **before** any fundraising activities can begin. **All orders related to fundraisers must have a purchase order.**
Directions 1. Fill out form 2. Meet with Penni in the business office 3. Get signatures 4. Start fundraiser

INTERNAL FUND(S) TO PROFIT: _____

NAME OF ACCOUNT: _____ DATE: _____

Submitted by: _____

DESCRIPTION OF ACTIVITY (INCLUDE PURPOSE, DATE AND BENEFICIARY) IF FUND RAISER ATTACH SUPPLEMENTAL SHEET EXPLAINING DETAILS.

DATE(S) OF ACTIVITY: _____

ADVANCEMENT OF FUNDS TO BUY PRODUCT (IF ANY):\$ _____

SOURCE OF FUNDS: _____

EXPECTED PROFIT OF FUND RAISER (IF KNOWN): \$ _____

Group leader or coach has reviewed accounting process with business office

Business office date Coach or group leader Date

APPROVED: _____ NOT APPROVED: _____ DATE: _____

PRINCIPAL/ATHLETIC DIRECTOR: _____ DATE: _____

APPROVED: _____ NOT APPROVED: _____

SUPERINTENDENT: _____ DATE: _____