

GILMER COUNTY SCHOOLS

Fundraiser Requests to be held 07-01-16 through 06-30-17

School: _____ Sponsor's Name: _____

Sponsoring Club or Organization: _____

Proposed Date to Start and End Campaign: _____

What is to be sold and how: _____

Company Furnishing Product: _____

Company Address: _____

Profit Agreement with Company (example 60/40): _____

Estimated Profit to be Realized: _____

Explain Reason for the Need of Funds (Justify Need): _____

Does This Fundraiser Violate TITLE IX Equity Issues? _____ Yes _____ No

IF A FLYER NEEDS APPROVAL FOR DISTRIBUTION, PLEASE ATTACH

As Faculty Advisor I am familiar with procedures for accounting for funds outlined in A Uniform Program of Accounting for School Activity Funds.

ADVISOR SIGNATURE _____ DATE: _____

PRINCIPAL APPROVAL _____ DATE: _____

SUPT. OFFICE APPROVAL _____ DATE: _____

PLEASE COMPLETE INFORMATION BELOW AND RETURN TO BOARD OFFICE WITHIN 30 DAYS OF COMPLETION OF CAMPAIGN!

Final Amount Collected from This Campaign: _____

Describe Use of Funds Collected and Expenditures: _____

Advisor Signature: _____ DATE: _____

***Please reference Gilmer County Board Policy 5040 for guidelines.**