

School: _____

School Year: _____

School Fundraising

PAC Fundraising

Grad Committee

Who is responsible for this activity? _____

Date of Activity: _____ Licence # (if applicable) _____

Description of Fundraising Activity: (e.g. Mom's Pantry sales)

Purpose of Fundraising Activity: (e.g. Safe Grad)

Fundraising Revenue: \$ _____

Fundraising Expenses: \$ _____

Submitted by: _____ Date: _____

Plan Approved

Plan Denied

Principal's Signature: _____ Date: _____