

INDEPENDENT SCHOOL DISTRICT
MONEY-RAISING ACTIVITY REPORT

PERMISSION REQUEST

NAME OF SCHOOL _____

Permission is request to conduct the following money-raising activity: _____

() school-wide () school-sponsored group _____

Specific purpose(s) for which the net proceeds is (are) to be used: _____

The following activity fund account(s) will receive the net proceeds: _____

Date: Beginning _____ and ending _____

TIME OF DAY (if applicable): 1st performance _____ 2nd performance _____

This is the 1st ___ 2nd ___ 3rd ___ 4th ___ 5th ___ 6th ___ 7th ___ money-raising activity for this semester (that I have requested) (Fill in appropriate information. [] School-wide [] school-sponsored group)

I, _____,

have requested permission to conduct a money-raising activity, and I will be responsible for the preparation of the OPERATING REPORT shown on the back side of this page, I will be responsible for the accountability of all monies collected at the conclusion of the money-raising activity, and I will turn in all records* to the principal or finance clerk.

_____ Date _____ Sponsor/Person Requesting Permission _____

APPROVED: _____
Area Superintendent or Representative

_____ Principal

Date _____

Date _____