

## FUNDRAISING APPROVAL FORM

\_\_\_\_\_  
Name of School, School Council, or Student Council

**Fundraising Activity:** \_\_\_\_\_

**Time Period:** \_\_\_\_\_ **Person Responsible:** \_\_\_\_\_

**Purpose for which net proceeds will be used:** \_\_\_\_\_

**Anticipated Total Revenue:** \_\_\_\_\_

**Anticipated Total Expenses:** \_\_\_\_\_

**Net Proceeds:** \_\_\_\_\_

**Approved:** \_\_\_\_\_  
Person Responsible (Print & Sign) Date

\_\_\_\_\_  
Principal (Print & Sign) Date

\*For those activities not already identified in the Plan for School Generated Funds or approved and reflected in the School Council Minutes.

2013 08

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