

Application for Fundraising Event
To be Completed and Signed by Club Advisor or Athletic Coach

Date: 9.21.18

Proposed Event: Habit

Description **and** Purpose of Fundraiser: raise monies for GVBALL uniforms, coach stipends 20% of school

What will the money be used for? coach stipends uniforms

Where will money be deposited? ASU Dolphin Force _____

501(c)3 _____ (specify name) _____

Requesting Club/Organization: GVBALL ASU Acct.# 2020

Proposed Date(s) of Event: NOV 2018

Location of Proposed Activity: _____

Status of Event (circle one): _____ New Event _____ Held Previously (Years): _____

Other Background Information (such as other schools or clubs that have held similar events):

Budget Plan for Activity (See Attachment)

Club Contact Person: VICKI TEAR MOM

Club Representative (signature, date) [Signature]

Club Advisor/Athletic Coach: GUS CULVER

Club Advisor/Athletic Coach (signature, date) [Signature]

Student Council Recommendation (circle) Yes No

Student Council Representative (name, signature, date) buy app money 10pp [Signature] 9/26/18

Principal or Designee Action (circle) Yes No

Principal or Designee (name, signature, date) [Signature]

Revenue Potential (Fundraising Budget versus Actual Statement)

Name of School: DHHS
 Name of Club: AVBM

Revenue Potential/Fundraising Budget versus Actual Statement

Fiscal Year: _____

Name of Event: _____
 Date of Event: NOV 2018
 Date Form Completed: 9.27.18

EXPECTED REVENUE:	BUDGET	ACTUAL	DIFFERENCE
Sales quantity x Sales price	\$ 500	\$	\$
OTHER REVENUE:			
Donations, Sales of ads, etc.	\$	\$	\$
TOTAL REVENUE (A)	\$	\$	\$
EXPENSES:			
Product quantity x Cost (per invoice)	\$	\$	\$
OTHER EXPENSES:			
Freight	\$	\$	\$
Advertising <u>FWJ</u>	\$ 90	\$	\$
Other	\$	\$	\$
TOTAL EXPENSES (B)	\$ 90	\$	\$


OTHER: (C)
Items Donated or Given as Prizes --
Quantity x Cost

\$	\$
\$	\$

TOTAL PROFIT (A-B-C)

\$ 450

Submitted and Approved by:



Student Club Representative:

Signature, Title and Date

Club Advisor:

Signature, Title and Date

Principal/School Administrator:

Signature, Title and Date

Recorded in ASB Student Council Minutes on: 9/26/18

Date