

Application for Fundraising Event

To be Completed and Signed by Club Advisor or Athletic Coach

Date: 10/30/19

Proposed Event: Sees Candy

Description **and** Purpose of Fundraiser: Off campus - Sell Sees Candy to fund SOCSA Vocal Coaching AND Trips

What will the money be used for? Coaching and trips

Where will money be deposited? ASU Dolphin Force

501(c)3 _____ (specify name) _____

Requesting Club/Organization: Choir ASU Acct.# 2618

Proposed Date(s) of Event: Nov 11th - Dec 6th

Location of Proposed Activity: Off campus

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

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

Budget Plan for Activity (See Attachment)

Club Contact Person: Tara Kivinski

Club Representative (signature, date) [Signature] 10-30-19

Club Advisor/Athletic Coach: Ray Medina

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

Student Council Recommendation (circle) Yes No

Student Council Representative (name, signature, date) Jacqueline Bernard 11/4/19

Principal or Designee Action (circle) Yes No

Principal or Designee (name, signature, date) [Signature] 11/4/19

Revenue Potential (Fundraising Budget versus Actual Statement)

Name of School: Dann Hills H.S.

Name of Club: SOC SA Choir

Revenue Potential/Fundraising Budget versus Actual Statement

Fiscal Year: 2019/2020

Name of Event: Sees Candy Fundraiser

Date of Event: Nov. 11 - Dec. 6, 2019

Date Form Completed: Oct. 30, 2019

EXPECTED REVENUE:	BUDGET	ACTUAL	DIFFERENCE
Sales quantity x Sales price	\$ 2,100	\$	\$
OTHER REVENUE:			
Donations, Sales of ads, etc.	\$	\$	\$
TOTAL REVENUE (A)	\$ 2,100	\$	\$
EXPENSES:			
Product quantity x Cost (per invoice)	\$ 1,050	\$	\$
OTHER EXPENSES:			
Freight	\$ —	\$	\$
Advertising	\$ —	\$	\$
Other	\$ —	\$	\$
TOTAL EXPENSES (B)	\$ 1,050	\$	\$

OTHER: (C)			
Items Donated or Given as Prizes – Quantity x Cost	\$	\$	\$
TOTAL PROFIT (A-B-C)	\$ 1,050	\$	\$

Submitted and Approved by:

Student Club Representative: Tom Minto PR 10-30-19
Signature, Title and Date

Club Advisor: [Signature] Director 10/30/19
Signature, Title and Date

Principal/School Administrator: _____
Signature, Title and Date

Recorded in ASB Student Council Minutes on: _____
Date