

**OUTSIDE SCHOOL - RELATED ORGANIZATION  
FUND-RAISING ACTIVITY REQUEST**

NAME OF ORGANIZATION: \_\_\_\_\_

TYPE OF EVENT: \_\_\_\_\_

PURPOSE OF EVENT: \_\_\_\_\_

LOCATION: \_\_\_\_\_

FROM: \_\_\_\_\_, 20\_\_\_\_ TO \_\_\_\_\_, 20\_\_\_\_

TYPE OF ITEMS TO BE SOLD: \_\_\_\_\_

NUMBER TO BE SOLD: \_\_\_\_\_

ANY OTHER NECESSARY INFORMATION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SUBMITTED TO:**

/S/ \_\_\_\_\_  
President of Organization Date

**RECEIVED BY:**

/S/ \_\_\_\_\_  
Bookkeeper Date

**APPROVED BY:**

/S/ \_\_\_\_\_  
Principal Date

**Complete and give to the bookkeeper who will make copies and distribute as follows:**

- Original      Bookkeeper
- 1st Copy     President of Organization
- 2nd Copy     Student Activities Director (if applicable)