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School	TCCHS	···	027504100410	
Activity Account	#60 Project Graduation 20	15		
External Support/Booster Organization			****	
Name of Fundraiser	Wooly Teacher Shave		Marine Constitution of the	
Sponsor	Project Graduation Office	rs		
Date Submitted	4-Feb-15		***************************************	······································
Purpose of fundraising activity: Funds raised will be used to purchase gifts,	(What will the funds be used for food, and supplies for 2015 Project C			
Items to be sold: Donations will be accepted from advisory classiowed to shave at least 2 teachers' beards	asses daily for one week. The advisor	ry collecting the	most mo	ney will be
Beneficiary of fundraising activity: 2015 graduates that attend Project Graduat	(Who will receive the benefit of ion	the funds)	n dendrischen der eine Samile weren der einem de	
Date(s) scheduled: February or March 2015			···	
Names of adult supervisors at activity (chap Faye Turnbaugh Cherie Morris	perones, custodians, etc.):			
		2 <del>20. m.</del>		
Athletic Fundraiser		Yes	T	No X
If yes, sport involved:			Benganisk	
Corresponding sport participating in fundr	aiser?	Yes		No X
Coaches Signature (corresponding sport)			Date	
Circle One: Approved	Not Approved			
Gent B			Dats /6/15	
Principal			Da	te '
SBDM Council (If Council Policy)		Many Constitute Mann	Da	te
Superintendent		sziensmuotorinius	Da	te
Superintentien			* 2	

## SCHOOL ACTIVITY FUND FUNDRAISER APPROVAL

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School	Тссня	anarinininininininini		Project Control of the Control of th
Activity Account	#60 Project Graduation 2015			Married Marrie
External Support/Booster Organization				
Name of Fundraiser	Grudge Match Basketball		###***********************************	the state of the s
Sponsor	Project Graduation Officers			The state of the s
Date Submitted	4-Feb-15			
Purpose of fundraising activity: Funds raised will be used to purchase gifts, fo	A Committee of the Comm			
				Markethania and Christopha (construction of the Construction of th
		0	-	W. Commission of the Commissio
Items to be sold: Tickets to event, concessions, silent auction a	and donations will be accepted at the ga	ine.		
Beneficiary of fundraising activity: 2015 graduates that attend Project Graduati	(Who will receive the benefit of the ion	funds)		NAMES AND THE PROPERTY OF THE
Date(s) scheduled:  1 March 21, 2015				
Names of adult supervisors at activity (chape Faye Turnbaugh		THE PROPERTY OF THE PROPERTY O		Name and the second
Cherie Morris	NAME OF THE OWNER O			
		and the second s	<del>ária (sa usia (sa usus a sa usus a</del>	***************************************
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		<u>«</u>	1 1	No. IV.
Athletic Fundraiser		Yes	Ll	No X
If yes, sport involved:	New W	Yes		No X
Corresponding sport participating in fundra	discr;	Y es		
Cambra Cimentum Commission of		*****	Da	te
Coaches Signature (corresponding sport)	The state of the s			
Circle One: Approved	Not Approved			
Qualle-			Date	1/2/15
Principal	No. of the second secon	Medican	Da	te The
U				
SBDM Council (If Council Policy)			Da	te
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Superintendent		Names and	Dа	ite
on en Brant contaminate programme				

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Activity Account	#60 Project Graduation 2015			
External Support/Booster Organization			MANUSCO MANUSC	241146
Name of Fundraiser	Car Wash			
Sponsor	Project Graduation Officers	1		CALL LAND AND AND AND AND AND AND AND AND AND
Date Submitted	4-Feb-15	***************************************		
Purpose of fundraising activity: Funds raised will be used to purchase gifts, food				
Items to be sold: Donations will be accepted for washing cars		Medical control of the second		
Beneficiary of fundraising activity: 2015 graduates that attend Project Graduation	(Who will receive the benefit of the f	unds)	EMALINE CHICAGO AND CONTROL CHICAGO AND CONTRO	
Date(s) scheduled: Apr-15  Names of adult supervisors at activity (chapero Faye Turnbangh	nes, custodians, etc.):			
Cherie Morris				
		Mary Control of the State of th		entritorni-mainment soletiment.
Athletic Fundraiser		Yes		No X
If yes, sport involved:		w	Amounted.	processing.
Corresponding sport participating in fundraise	er?	Yes		No X
		*	***************************************	
Coaches Signature (corresponding sport)	tesses as the resident of the	***************************************	Da	te
Circle One: Approved	Not Approved.		Date	1. 1100
TAUL ID		*		<u>  [6] 15                                   </u>
Principal			Da	te
SBDM Council (If Council Policy)		77	Da	te .
Superintendent	Market San Care Care Care Care Care Care Care Care	72	Da	te