

**Fund-Raising Activities-Proposal**

All sales representatives who wish to participate in a school fund-raising program shall complete the following form and submit it to the Superintendent who may then present the request to the Board for approval.

**Name/Address of Business Firm** Southgate 8<sup>th</sup> grade trip and graduation

**Representative's Name** Mandy Stephens **Phone #** 859-466-9282

**Description of Items\*** (*Attach brochures, etc., if applicable.*)

Ghost gram.

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**Description of Program:** Ghost grams. Selling after school candy and a message gram to students – the whole school can purchase.

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**Company registered with Better Business Bureau?**       YES       NO

**Pricing** (*Attach price list, if applicable.*)

Wholesale price of items 50 cents per gram

Retail price of items \_\_\_\_\_ na \_\_\_\_\_

School Profit \_\_\_\_\_ na \_\_\_\_\_

*\* Items shall not include coupons from other businesses as incentives for purchase.*

Mandy Stephens  
*Sales Representative's Signature*

8/24/2016  
*Date*

\_\_\_\_\_  
*Superintendent/designee's Signature*

\_\_\_\_\_  
*Date*

Review/Revised:7/11/13