

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 8th grade trip and graduation

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

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

Dining out at local restaurants we receive a percentage of the proceeds.

Description of Program: We will dine out at local restaurants on a specific evening and proceeds will go to us (approximately 20%). We will contact a couple of local participating restaurants.

Company registered with Better Business Bureau? YES NO

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

Wholesale price of items _____ na _____

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

8/16/2016
Date

Superintendent/designee's Signature

Date

Review/Revised:7/11/13