

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	Todd County Middle School
Activity Account	Academic Team
External Support/Booster Organization	
Name of Fundraiser	Governor's Cup
Sponsor	Lisa Porter
Date Submitted	11/28/2016

Purpose of fundraising activity: (What will the funds be used for? Be specific)  
Expenses for Academic Meets ie... food, transporations, and expenses.

Items to be sold:  
Concession Stand Items while hosting Gov Cup

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)  
Todd County Middle School Students - Academic Team

Date(s) scheduled:  
January 17th and January 21st

Names of adult supervisors at activity (chaperones, custodians, etc.):  
Lisa Porter

Athletic Fundraiser	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes, sport involved:		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<i>Lisa Porter</i>		
Coaches Signature (corresponding sport)	Date <i>11/28/16</i>	

Circle One:

Approved

Not Approved

*J. B.*  
Principal

*11-28-16*  
Date

*11/28/16*  
Date

SBDM Council (If Council Policy)

Date

Superintendent

Date