

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	Todd County Middle School
Activity Account	Band
External Support/Booster Organization	N/A
Name of Fundraiser	Donations
Sponsor	Carmichael
Date Submitted	August 28, 2017

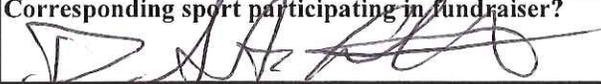
**Purpose of fundraising activity:** (What will the funds be used for? Be specific)  
 Funds will be used to purchase instruments, music, and supplies for the band. Additionally, funds will support travel expenses for band functions, audition fees, and other fees associated with honor band and/or performance opportunities for our students.

**Items to be sold:**  
 None - if community members and/or individuals would like to donate in place of participate in possible future fundraisers, or just to help out the band, we'd like to accept those donations.

**Beneficiary of fundraising activity:** (Who will receive the benefit of the funds)  
 TCMS Band

**Date(s) scheduled:**  
 Immediately upon approval through July 31, 2018.

**Names of adult supervisors at activity (chaperones, custodians, etc.):**  
 Carmichael

<b>Athletic Fundraiser</b>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes, sport involved:		
<b>Corresponding sport participating in fundraiser?</b>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	August 28th, 2017	
<b>Coaches Signature (corresponding sport)</b>	<b>Date</b>	

**Circle One:**      Approved      Not Approved

**Sponsor**  **(Requested by)** \_\_\_\_\_  
**Principal** \_\_\_\_\_ **Date** 8/28/17

**SBDM Council (If Council Policy)** \_\_\_\_\_ **Date** \_\_\_\_\_  
**Superintendent** \_\_\_\_\_ **Date** \_\_\_\_\_

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	Todd County Middle School
Activity Account	Band
External Support/Booster Organization	N/A
Name of Fundraiser	Kroger Community Rewards
Sponsor	Carmichael
Date Submitted	August 28, 2017

**Purpose of fundraising activity:** (What will the funds be used for? Be specific)  
**Funds will be used to purchase instruments, music, and supplies for the band. Additionally, funds will support travel expenses for band functions, audition fees, and other fees associated with honor band and/or performance opportunities for our students.**

**Items to be sold:**  
**None - this is a donation from Kroger to the band program allowed by customers linking their Kroger cards to the band account online using the Community Rewards section of their membership.**

**Beneficiary of fundraising activity:** (Who will receive the benefit of the funds)  
**TCMS Band**

**Date(s) scheduled:**  
**Immediately upon approval through July 31, 2018.**

**Names of adult supervisors at activity (chaperones, custodians, etc.):**  
**Carmichael**

<b>Athletic Fundraiser</b>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<b>If yes, sport involved:</b>		
<b>Corresponding sport participating in fundraiser?</b>	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	<b>August 28th, 2017</b>	
<b>Coaches Signature (corresponding sport)</b>	<b>Date</b>	

**Circle One:** Approved Not Approved

**Sponsor** (Requested by) \_\_\_\_\_  
**Principal**  \_\_\_\_\_ **Date** 8/28/17

**SBDM Council (If Council Policy)** \_\_\_\_\_ **Date** \_\_\_\_\_

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

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	TCMS
Activity Account	REBEL DEPOT
External Support/Booster Organization	
Name of Fundraiser	REBEL DEPOT BOOKSTORE
Sponsor	SANDY POWER
Date Submitted	####

Purpose of fundraising activity: (What will the funds be used for? Be specific)  
**THE STORE IS SET UP TO OFFER REAL LIFE APPLICATION OF THE JOB WORLD. THEY AP  
 RUN A BOOKSTORE**

Items to be sold:  
**SCHOOL SUPPLIES SUCH AS PENCILS, PAPER, FOLDERS, PENS, FLASHDRIVES, EAR BUDS**

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)  
**THIS IS NOT A MONEY MAKING FUNDRAISER. IT IS A EXPERIENCE FOR THE STUDENTS.  
 RESTOCK THE STORE.**

Date(s) scheduled:  
**2017-2018 SCHOOL YEAR**

Names of adult supervisors at activity (chaperones, custodians, etc.):  
**SANDY POWER**

Athletic Fundraiser	Yes	<input type="checkbox"/>
If yes, sport involved:		
Corresponding sport participating in fundraiser?	Yes	<input type="checkbox"/>
<i>Sandy Power</i>		
Coaches Signature (corresponding sport)		

Circle One:

Approved

Not Approved

Sponsor

(Requested by)

Principal

*[Signature]*

*8/28/17*

SBDM Council (If Council Policy)

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	TCMS
Activity Account	Annual
External Support/Booster Organization	Yearbook
Name of Fundraiser	Pictures
Sponsor	Nikki Andrews
Date Submitted	8/28/2017

**Purpose of fundraising activity:** (What will the funds be used for? Be specific)  
 We will be raising money that will go directly for purchasing yearbooks, camera equipment, and any materials used to benefit the year book.

**Items to be sold:**  
 Pictures during and after the school day, dances, sporting activities, 8th grade promotion, extracurricular sports, and any TCMS holds and/or sponsors.

**Beneficiary of fundraising activity:** (Who will receive the benefit of the funds)  
 Annual/ Yearbook account

**Date(s) scheduled:**  
 Dates will vary depending on the event or reason for pictures to be taken.

**Names of adult supervisors at activity (chaperones, custodians, etc.):**  
 Nikki Andrews

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

**Circle One:** Approved Not Approved

Nikki Andrews  
 Sponsor (Requested by)

8/28/17

[Signature]  
 Principal

8/28/17  
 Date

SBDM Council (If Council Policy)

Date

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	TCMS
Activity Account	Cheerleading
External Support/Booster Organization	
Name of Fundraiser	Game Items
Sponsor	Denise Dossett
Date Submitted	8/28/2017

Purpose of fundraising activity: (What will the funds be used for? Be specific)  
 Uniforms, camp, cheerleading supplies

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Items to be sold:  
 Stadium seats, coolers, blankets, lunch boxes

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Beneficiary of fundraising activity: (Who will receive the benefit of the funds)  
 Cheerleading

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Date scheduled:  
 September

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Names of adult supervisors at activity (chaperones, custodians, etc.):  
 Denise Dossett  
 Sydney Rager

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

Circle One: Approved Not Approved

Denise Dossett 8/28/17  
 Sponsor (Requested by)

[Signature] 8/28/17  
 Principal Date

SBDM Council (If Council Policy) Date

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**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

School	TCMS
Activity Account	Library
External Support/Booster Organization	
Name of Fundraiser	Scholastic Book Fair
Sponsor	Melanie Vincent
Date Submitted	8/25/2017

Purpose of fundraising activity: (What will the funds be used for? Be specific)  
To purchase books for the library

Items to be sold:  
Books and items related to books

Beneficiary of fundraising activity: (Who will receive the benefit of the funds)  
Library

Date(s) scheduled:  
October 2017  
April 2018

Names of adult supervisors at activity (chaperones, custodians, etc.):  
Melanie Vincent

Athletic Fundraiser If yes, sport involved:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Coaches Signature (corresponding sport) \_\_\_\_\_ Date \_\_\_\_\_

Circle One: Approved Not Approved

Melanie Vincent *Melanie Vincent* \_\_\_\_\_ Date 8/25/17  
Sponsor (Requested by)

*[Signature]* \_\_\_\_\_ Date 8/28/17  
Principal

SBDM Council (If Council Policy) \_\_\_\_\_ Date \_\_\_\_\_

Superintendent \_\_\_\_\_ Date \_\_\_\_\_