

SCHOOL ACTIVITY FUND FUNDRAISER APPROVAL

School	WMES
Activity Account	
External Support/Booster Organization	
Name of Fundraiser	KONA ICE
Sponsor	WMES PTO
Date Submitted	8/13/17

RECEIVED
AUG 16 2017
MCPS

Purpose of fundraising activity:

Reward activity for students

Items to be sold:

Kona Ice

Beneficiary of fundraising activity:

WMES PTO

Date(s) scheduled:

Aug - 2017

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

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 type="checkbox"/>
Coach's signature (corresponding sport)	Date	

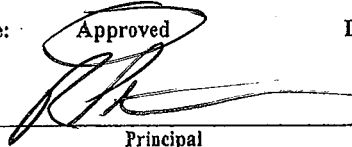
Circle One:

Approved

Disapproved

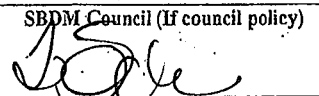
Date:

8/14/2017


Principal

8/14/17
Date

SBDM Council (If council policy)


Superintendent as directed by Board
(If School-Wide fundraiser)

Date

8/17/17
Date