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 SRF

Representative's Name CLIFF PERKINS **Phone #** 859-391-1478

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

RESTAURANT FUND RAISER.

Description of Program WHITE CASTLE COUPON BOOKS ($20.00 VALUE) WILL BE MADE AVAILABLE FOR PURCHASE ON THE DISTRICT WEBSITE FOR $ 5 ON A PREPAID BASIS. PROMOTIONAL FLYERS WILL ALSO BE SENT HOME.

Company registered with Better Business Bureau? ☐ YES ☐ NO

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

Wholesale price of items _____

Retail price of items _____

School Profit _____

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

_____ 10-9-17
Sales Representative's Signature ***Date***

_____ 11/7/17
Superintendent/designee's Signature ***Date***

Review/Revised:7/11/13