

Must be received at Central Office NLT than Wednesday (1 week prior) to the board meeting

**FUND RAISING FORM**  
**Simpson County Schools**

JAN 24 2019

School: Lincoln Elem.

Activity Fund: Pennies for Lymphoma

Sponsor: Jessica Perkins & Kathryn Knipp

Date Submitted: 1-22-19

What grade range will be involved in this activity? 4<sup>th</sup> & 5<sup>th</sup>

State the one MAIN purpose of this fund raising activity (how will students benefit from participating in this activity?):

☒ Educational experience      ☐ School spirit      ☐ Community service

☒ Fund Raising      ☐ Other: \_\_\_\_\_

Describe Activity: The students will collect change in order to help with lymphoma.

Beneficiary of fund raising activity: Pennies for Patients Leukemia and Lymphoma Society.

Place of Activity: Home / School

Date(s) of Activity: 2/1/19 - 3/1/19      Time(s) of Activity: any

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

Kathryn Knipp      > 5<sup>th</sup> grade teacher  
Jessica Perkins

Joye Pas      1/21/2019  
Principal      Date

SBDM Council (if Council Policy)      Date

Superintendent      Date

Board Approval Date \_\_\_\_\_ Not Approved