

Fund-Raising Activities—Fund Raiser Request

**NELSON COUNTY SCHOOLS
Fund Raiser Request**

SCHOOL Foster Heights Elem. SCHOOLWIDE FUND RAISER
CLUB/GROUP Gifted and Talented Service Project
SPONSOR(S) Jessica Scheerhorn
FUND RAISING ACTIVITY Service Project to raise money for cancer patients

DATE OF FUND RAISER: From 1/23/19 to 2/8/19

LOCATION OF FUND RAISER:

- School
- Door-to-Door Sales (with accompanying adult)
- Business Community
- Local Business Property _____

Name of Business

Other _____

Please specify

NAME OF COMPANY/ORGANIZATION Leukemia/Lymphoma Society

ADDRESS OF COMPANY/ORGANIZATION _____

TELEPHONE NUMBER OF BUSINESS _____

APPROXIMATE AMOUNT OF REVENUE TO BE RETAINED AT SCHOOL \$ 0

ANTICIPATED USE OF FUNDS Cancer research

Jessica Scheerhorn _____ 2/4/19
Sponsor's Signature *Date*

[Signature] _____ 2/5/19
Principal's Signature *Date*

Superintendent/Designee's Signature *Date*

To Be Completed by Central Office Designee

Schoolwide fund-raising activities require Board approval.

Check: Approved Disapproved Date of Board Action: _____ Order # _____