



Gallatin County School District School Activity Fundraiser Request Form

School	Gallatin county upper elementary
Activity Account	87448
External Support/Booster Organization	GCUE PTSO
Name of Fundraiser	Penny War 3.25 - 3.29
Sponsor	PTSD
Date Submitted	3-11-19

Purpose of Fundraiser
Raise money for K-prep rewards
Names of adult supervisors of activity Carrie Apperson

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

APPROVED

NOT APPROVED

Date _____

Amanda Carroll

Principal

Date 3/11/19

SBDM (if council policy)

Date _____

Superintendent (if school-wide fundraiser)

Date _____

Final Approved Copy needs to be sent to the Accounting Department