

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

**FUND RAISING FORM**

**Simpson County Schools**

School: F.S.M.S.

Activity Fund: \_\_\_\_\_

Sponsor: Fran Crawford

Date Submitted: 6.19.19

What grade range will be involved in this activity? 6-8<sup>th</sup> MSD

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: Classroom needs

Describe Activity: DonorsChoose.org Page  
to obtain Sensory furniture  
and Flexible Seating


Beneficiary of fund raising activity: 11 M.S.D. Students  
and future M.S.D. Students in  
6<sup>th</sup>-8<sup>th</sup> grades

Place of Activity: Online

Date(s) of Activity: 7-1.19-7.31.19 Time(s) of Activity: 24/7

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

Fran Crawford

  
Principal \_\_\_\_\_ Date 7/8/19

SBDM Council (if Council Policy) \_\_\_\_\_ Date \_\_\_\_\_

Superintendent \_\_\_\_\_ Date \_\_\_\_\_

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