SCHOOL ACTIVITY FUND FUNDRAISER APPROVAL

School	Todd County Middle		
Activity Account	Cheerleading		
External Support/Booster Organization			
Name of Fundraiser	Chick-fil-a Spirit Night		
Sponsor	April Griffin		
Date Submitted	8/26/2019		
Purpose of fundraising activity: The fundraising money will be used to help cov This includes clothing, competition fees, transp		d competition cheer.	
Items to be sold: Chick-fil-a in Hopkinsville will donate a portion	n of sales on assigned night & time to	our fundraiser.	
Beneficiary of fundraising activity: The cheerleading team.	(Who will receive the benefit o	f the funds)	
Date(s) scheduled: September 2019			
Names of adult supervisors at activity (chapero April Griffin & Sydney Rager	nes, custodians, etc.):		
Athletic Fundraiser		Yes X	No
If yes, sport involved: Cheerleading Corresponding sport participating in fundraise	r?	Yes	No X
			
Coaches Signature (corresponding sport)		Date	
Circle One: Approved	Not Approved	8-1	16-19
Sponsyr (Requested by			26/19
Principal		Date	· 1
SBDM Council (If Council Policy)		Date	
Superintendent		Date	

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Date Subm	itted						<u> </u>			+-
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Purpose of	fundraising activit	<u>y:</u>			nds be used for? Be	specific)	┨			+
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Sponsor		Katherine P	ower Cole				+	┿
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	Sponsor		·		Katherine Pe	ower Cole					
	Date Submit	ted				``					
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	Purpose of f	undraising ac	tivity:			ds be used for? Be sp	ecific)				$-\!\!\!\!+$
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.xternal Support/Booster Organization		T 31			_			_
Name of Fundraiser		Noodles Katherine P	lower Colo				$\top$	_
Sponsor		Catherine P	ower Cole		_		一	_
Date Submitted							十	
	(What	will the fu	nds be used for?	Be specific)				****
Purpose of fundraising activity: Uniforms, Dance wear, Shoes, Competition	Fees Com	netition Ho	tel Rooms, Cami	fees, banquet	cost	s, and/or Po	ms	
Uniforms, Dance wear, Shots, Competition	1 1							
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Items to be sold:		and the state of t						<b></b>
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Beneficiary of fundraising activity:	(Who	will receiv	e the benefit of th	e funds)		Salanda a polymenty mentena managan and a salah a salah sala	Parchadament (1989)	148744
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October-November							_	_
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Names of adult supervisors at activity (cha	iperones, ci	15100114115, 0			1	allen erreinige in die der der der der der der der der der de		
Katherine Power Cole							-	
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Athletic Fundraiser				Yes	X	No		
If yes, sport involved:		ngranisanisanisanisanis	TO STATE A CONTRACTOR OF THE STATE OF THE ST					
Corresponding sport participating in fund	lraiser?			Yes	X	No		
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Coaches Signature (corresponding sport)						Date		
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Circle One: Approved	7	Not Approv	ed	grow wyglebbo				
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Superintendent			1	mg plane of a state as a real graph of a state of the sta	-	Date	-	

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School	TCMS			
Activity Account	Dance Team			
xternal Support/Booster Organization				
Name of Fundraiser	Hairbows	***		
Sponsor	Katherine Power Col	e		
Date Submitted				
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Purpose of fundraising activity:	(What will the funds be use			
Uniforms, Dance wear, Shoes, Competition	n Fees, Competition Hotel Rooms	s, Camp fees, banquet c	osts, and/or P	oms
Items to be sold:				
Hair bows in school colors with TC logo or	n them.		The state of the s	
				and the special state of the s
Beneficiary of fundraising activity:	(Who will receive the benef	fit of the funds)		
All Dancers				
Date(s) scheduled:		ay anny ngani namina yan an isar ya maka ay anna kayinga dayad hala inganin da	THE RESERVE AND ASSESSMENT OF THE PROPERTY OF	
September-November				
OCPEMBET NOTEMBET				
lames of adult supervisors at activity (cha	nerones, custodians, etc.):			
Katherine Power Cole			- chance and an analysis of the contract of th	
Ratherine I over Core				
			<del>                                     </del>	
Adlada Francisco		Yes X	No	
Athletic Fundraiser		100 /	110	
If yes, sport involved:	J., -19	Yes X	No	
Corresponding sport participating in fund	raiser:	155 2	140	
			<b>D</b> 4	
Coaches Signature (corresponding sport)			Date	
The state of the s				
Circle One: Approved	Not Approved	and the state of t		
			ate /	10
		D. COMMONDATION OF THE COMMOND AND ADDRESS OF THE COMMOND AND ADDRESS OF THE COMMOND ADDRES	4/26/1	
Principal			Date	
		MATERIA RAMANIAN OR SON (CO. TESTINO) POR PARAMENTAL SON AND AND AND AND AND AND AND AND AND AN	all and the second seco	
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SBDM Council (If Council Policy)		·	Date	otograpov, optajo i sotigidanosti, pod
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1			- In .	
Superintendent			Date	1 1 1

## SCHOOL ACTIVITY FUND FUNDRAISER APPROVAL

School	Todd County Middle School		
Activity Account	Student Rewards		
External Support/Booster Organization	N/A		
Name of Fundraiser	World's Finest Chocolate	,	
Sponsor	Carmichael		
Date Submitted	08/26/2019		
Purpose of fundraising activity: Funds raised will be used to reward stude throughout the year.	(What will the funds be used fo ents throughout the year. Funds w	or? Be specific)	vei, prizes, t-shirts, etc.
Items to be sold: Chocolate bars & candy			·
Beneficiary of fundraising activity: TCMS students	(Who will receive the benefit o	of the funds)	
Date(s) scheduled: September 2019			
and the second s			
Names of adult supervisors at activity (ch	aperones, custodians, etc.):		
Carmichael, with PTO assistance			
Athletic Fundraiser		Yes	No X
If yes, sport involved:		· L	
Corresponding sport participating in fund	draiser?	Yes	No X
	,		
Coaches Signature (corresponding sport)			Date
Circle One: Approved	Not Approved		
		_	
David A. Carmichael			8/26/2019
Sponsor (Requested b	<u>⊼</u> )		Date
1) VH/A			8/76/19
Principal			Date
· · · · · · · · · · · · · · · · · · ·			
SBDM Council (If Council Policy)			Date
			,
Superintendent		-	Date