Fund-Raising Activities-Proposal

All sales representatives who wish to participate in a school fund-raising program shall complete the following form and submit it to the Superintendent who may then present the request to the Board for approval.

Name/Address of Business Firm

Southood to the Superintendent who may then present the request to the Board for approval.

Trainer Address of Dusiness Firm Obog 19010 (11000) of 10	
Representative's Name Mandy Stephens	Phone # <u>859-464-</u> 92
Description of Items* (Attach brochures, etc., if applicable.)	
Weekey Bake Sale	
Every Friday starting. 9-13-19 from	3:00-3:30
Description of Program 8th Grade Fundraiser	
Company registered with Better Business Bureau?	□ NO
Pricing (Attach price list, if applicable.)	
Wholesale price of items	
-	
Retail price of itemsSchool Profit & the Grade	
* Items shall not include coupons from other businesses as incentives for	purchase.
Mandy Stephens	8-25-19
Sales Representative's Signature	Date
Gazi fit	9/11/19
Superjhtendent/designee's Signature	Date
/	Review/Revised:7/11/13