## **FUND RAISING FORM Simpson County Schools**

School: Jimpson El		i i
Activity Fund:		
Sponsor: MIKE BAIL	(A)R)	
<b>Date Submitted:</b>		
What grade range will be involved		
State the one MAIN purpose of the participating in this activity?):	his fund raising activity (he	ow will students benefit from
Educational experience	School spirit	Community service
Fund Raising Oth	er: Scile of Lickets	to a show.
Describe Activity: DR May	n Wither King JR.	PortRait (CINTER)
Zoth year celebra	tion of the Mi	nners, Will collaborate ter to bring a pertormer in
Beneficiary of fund raising activity:	All coc student	and to along a personnel in
beneficiary of fund raising activity.	ALL SES SPUCIFIF	
Place of Activity: Simpson	Ėl	
Date(s) of Activity: Feb 27,		
Names of adult supervisors at activit		
Mike BALLARD	y (chaperones, custodians, e	TC.):
THE BITTHE		——————————————————————————————————————
Principal	Date	
SBDM Council (if Council Policy)	Date	
Superintendent	Date	
Board Approval Date		Not Approved