FUND RAISING FORM Simpson County Schools

School: Simpson Elementery	
Activity Fund: Library	
Sponsor: SES Library	
Date Submitted:	
What grade range will be involved in this activity?	/s+ - 3rd
State the one MAIN purpose of this fund raising a participating in this activity?):	activity (how will students benefit from
Educational experienceSchool s	pirit Community service
Fund Raising Other:	
Describe Activity: We will work with	
book fairs during the year.	
Beneficiary of fund raising activity: <u>SES Liber</u> SES.	all stodents at
Place of Activity: SES 4 Online	
Date(s) of Activity: Ongoing Biginning Tim	
Names of adult supervisors at activity (chaperones, co	ustodians, etc.): W. Nathur
School	
Principal Bank	1/6/21 Date
SBDM Council (if Council Policy)	Date
Superintendent	Pate
Board Approval Date	Not Approved

FUND RAISING FORM Simpson County Schools

School: Dimpson Elementary	
Activity Fund:	
Sponsor:	
What grade range will be involved in this ac	tivity?
State the one MAIN purpose of this fund participating in this activity?):	raising activity (how will students benefit from
Educational experience	School spirit Community service
Fund Raising Other:	
Describe Activity: Valentines Kits	t Camy Gram Will be available on the
to families for puchase. Enster &	puskets will be available in the
spring also.	
Beneficiary of fund raising activity: 5 tole	ents of SES faculty & staff.
Place of Activity:SES	
	Time(s) of Activity:
	rones, custodians, etc.):
PTO offices, teaches & admin	
while your	8/6/2021
Principal	Date
SBDM Council (if Council Policy)	Date
Superintendent	Date
Board Approval Date	Not Approved

FUND RAISING FORM Simpson County Schools

School:	
Activity Fund: School Pics	
Sponsor: SES	
What grade range will be involved in this act	ivity?
State the one MAIN purpose of this fund reparticipating in this activity?):	aising activity (how will students benefit from
Educational experienceS	chool spirit Community service
Fund Raising Other:	
Describe Activity: Galam photography	will take pictores of our
Stodents. These will be available	able for purchase
Place of Activity: SGS	
Place of Activity: SE5	
Names of adult supervisors at activity (change	Time(s) of Activity:
Tenchess, Admin.	ones, custodians, etc.):
Principal Con-	<u>\$/4/202/</u> Date
SBDM Council (if Council Policy)	Date
Superintendent	Date
Board Approval Date	Not Approved