

**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

F-SA-2A

<b>School</b>	North Todd Elementary School
<b>Activity Account</b>	255.000 PTO
<b>External Support/Booster Organization</b>	PTO
<b>Name of Fundraiser</b>	Fall Festival
<b>Sponsor</b>	Elizabeth Power
<b>Date Submitted</b>	11/28/2023

<b>Purpose of fundraising activity: What will the funds be used for? (Be specific)</b>
Student rewards
<b>Items to be sold:</b>
various carnival style games, auction of donated items, concessions
<b>Beneficiary of fundraising activity: (Who will receive the benefit of the funds)</b>
North Todd Students
<b>Dates Scheduled:</b>
10/26/24 3:00 - 6:00
<b>Names of adult supervisors at activity (chaperones, custodians, etc.):</b>
PTO Officers, Faculty and Staff members

<b>Athletic Fundraiser</b>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>	<input checked="" type="checkbox"/>
<b>If yes, Sport involved</b>				
<b>Corresponding sport participating in fundraiser?</b>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>	<input checked="" type="checkbox"/>
<b>Coaches Signature (corresponding sport)</b>	<b>Date</b>			

<b>Circle One:</b>		<b>Not Approved</b>	11/28/2023
			<b>Date</b>
			11/28/2023
<b>Principal Signature</b>			<b>Date</b>
<b>SBDM Council (If Council Policy)</b>			<b>Date</b>
			11/30/23
<b>Superintendent Signature</b>			<b>Date</b>


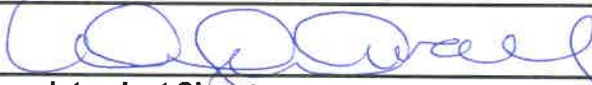
**SCHOOL ACTIVITY FUND  
FUNDRAISER APPROVAL**

F-SA-2A

<b>School</b>	North Todd Elementary School
<b>Activity Account</b>	GAM01 Gaming Account
<b>External Support/Booster Organization</b>	PTO
<b>Name of Fundraiser</b>	Fall Raffle
<b>Sponsor</b>	Elizabeth Power
<b>Date Submitted</b>	11/28/2023

<b>Purpose of fundraising activity: What will the funds be used for? (Be specific)</b>
Playground equipment and student rewards
<b>Items to be sold:</b>
\$1 raffle tickets for (2) \$500 cash prizes
<b>Beneficiary of fundraising activity: (Who will receive the benefit of the funds)</b>
North Todd Students
<b>Dates Scheduled:</b>
9/27/24 - 10/28/24 Drawing at 5:00 PM on 10/26/24
<b>Names of adult supervisors at activity (chaperones, custodians, etc.):</b>
PTO Officers, Faculty and Staff members

<b>Athletic Fundraiser</b>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>	<input checked="" type="checkbox"/>
<b>If yes, Sport involved</b>				
<b>Corresponding sport participating in fundraiser?</b>	<b>Yes</b>	<input type="checkbox"/>	<b>No</b>	<input checked="" type="checkbox"/>
<b>Coaches Signature (corresponding sport)</b>	<b>Date</b>			

<b>Circle One:</b>	<b>Approved</b>	<b>Not Approved</b>	11/28/2023
			<b>Date</b>
			11/28/2023
<b>Principal Signature</b>			<b>Date</b>
<b>SBDM Council (If Council Policy)</b>			<b>Date</b>
			11/30/23
<b>Superintendent Signature</b>			<b>Date</b>