

FUND RAISING FORM
Simpson County Schools

School: Lincoln Elementary

Activity Fund: _____

Sponsor: PTO

Date Submitted: _____

What grade range will be involved in this activity? 4-5

State the one MAIN purpose of this fund raising activity (how will students benefit from participating in this activity?):

____ Educational experience ____ School spirit ____ Community service

Fund Raising ____ Other: _____

Describe Activity: Fall festival, selling shirts, pants, hats, and other items, monthly food trucks/ Spirit Nights, Candy bar sales, Pie Your Teacher, After school activities (Glow dance)

Beneficiary of fund raising activity: PTO for students @ LES

Place of Activity: Just Piddlin' Farms/ LES/ other places in community

Date(s) of Activity: Aug 2024- May 2025 Time(s) of Activity: Various times

Names of adult supervisors at activity (chaperones, custodians, etc.): _____

Amber Frye Amber Anderson

Corine Gehret Other PTO members

Joyce Pais July 1, 2024
Principal Date

SBDM Council (if Council Policy) Date

Superintendent Date

Board Approval Date _____ Not Approved