| School | GES |
|---|---|
| Activity Account | PTO |
| External Support/Booster Organization | |
| Name of Fundraiser | Fall Festival |
| Website (if applicable) | |
| Sponsor | GES PTO- Liz Morason |
| Date Submitted | |
| | upplies for classroom |
| teachers and st | aff. |
| Items to be sold or items requested for donations | |
| Beneficiary/sport of fundraising activity: | |
| Anticipated profit and plans for excess funds: | |
| | |
| Date(s) scheduled: 2024 2025 | 5. School year. |
| Names of adult supervisors at activity (chaperon | |
| | |
| Sponsor | Date |
| Principal (If Council Policy) | Not Approved White White White White White |

| School | GES | |
|--|--------------------------|---|
| Activity Account | PTO | |
| External Support/Booster Organization | | |
| Name of Fundraiser | Popcorn Sales | |
| Website (if applicable) | | |
| Sponsor | GES Pro- UZ Morgeson | ~ |
| Date Submitted | 9 | |
| Purpose of fundraising activity: | or GES Studentiact | intie |
| and inciptives. | | |
| Items to be sold or items requested for donation | ı: | |
| Beneficiary/sport of fundraising activity: | | |
| Anticipated profit and plans for excess funds: | | |
| Date(s) scheduled: | | |
| Nov-De | 20 9094 | |
| Names of adult supervisors at activity (chaperon | nes, custodians, etc.): | • |
| | | |
| | | |
| Sponsor | Date | N. 100 (100 (100 (100 (100 (100 (100 (100 |
| Principal (If Coupeit Policy) | Not Approved Date Pate | 1/24 |
| | • | |

| School | GES |
|---|--|
| Activity Account | |
| External Support/Booster Organization | |
| Name of Fundraiser | Family Dance |
| Website (if applicable) | |
| Sponsor | |
| Date Submitted | |
| Purpose of fundraising activity: Raise # for St | udents remards. |
| Items to be sold or items requested for donation: | ······································ |
| Beneficiary/sport of fundraising activity: | , |
| Anticipated profit and plans for excess funds: Funds to be used | for rewards for |
| Students. | |
| Date(s) scheduled: Spring 20 | 25 |
| Names of adult supervisors at activity (chaperon | es, custodians, etc.): |
| | |
| Sponsor | Date |
| Principal Principal SBDM Council (If Council Policy) | Not Approved Aubbr Date Date |

Board Approval Date (if applicable)

| School | GES | |
|---|----------------------------------|----------|
| Activity Account | | |
| External Support/Booster Organization | | |
| Name of Fundraiser | School Books for Teachers | lassmons |
| Website (if applicable) | | |
| Sponsor | Lee Morgison | |
| Date Submitted | 0 | |
| Purpose of fundraising activity: To purchase bool From denations Items to be sold or items requested for donations | from parents : families. | .5 |
| Beneficiary/sport of fundraising activity: | ES | |
| Anticipated profit and plans for excess funds: | | |
| MA | | |
| | | |
| Oate(s) scheduled: 4 Spring 20 | 9 2 | <u>.</u> |
| Names of adult supervisors at activity (chaperon | es, custodians, etc.): | |
| Lee Morgison | | |
| Ru Maya | 5/24/24 Date | |
| Principal (If Council Policy) | Not Approved Cilber Date Date | |

| School | GES |
|---|---|
| Activity Account | Book Fair |
| External Support/Booster Organization | |
| Name of Fundraiser | Fall Book fair Spring Book fa |
| Website (if applicable) | 190 |
| Sponsor | Lee Morgeson |
| Date Submitted | 0 |
| Purpose of fundraising activity: To allow famili | ies to buy books for home |
| | ks for our school library. |
| Items to be sold or items requested for donation: | polies. |
| Beneficiary/sport of fundraising activity: | |
| Anticipated profit and plans for excess funds: | |
| Date(s) scheduled: | |
| Fall 2024 | Spring 2025 |
| Names of adult supervisors at activity (chaperon | es, custodians, etc.): |
| le Morgison | |
| Le May | 5 29 24 Date |
| Principal BBDM Council (If Council Policy) | Not Approved Culstin Date 1/0/24 Pate |

| School | GES | |
|--|----------------------------------|--|
| Activity Account | PE | |
| External Support/Booster Organization | | |
| Name of Fundraiser | 11-ties | |
| Website (if applicable) | 7 | |
| Sponsor | Talbin Overstreet | |
| Date Submitted | • | |
| Purpose of fundraising activity: For Students D | nysicus education | |
| Supplies. | Ţ. | |
| Items to be sold or items requested for donation: | | |
| Beneficiary/sport of fundraising activity: | | |
| physical education supplies & activities | | |
| and awards. | | |
| Date(s) scheduled: | | |
| Names of adult supervisors at activity (chaperon | es, custodians, etc.): | |
| | | |
| Sponsor | Date | |
| Principal Principal SBJM Council (If Council Policy) | Not Approved Cubbin Date Date | |

| School | GES | |
|---|-------------------------|-------------------------|
| Activity Account | PE | |
| External Support/Booster Organization | | |
| Name of Fundraiser | Struck Cups | |
| Website (if applicable) | | |
| Sponsor | Talbin Overstree | Lt. |
| Date Submitted | , | |
| Purpose of fundraising activity: Tox Students ph Supplies. | ysiche education | ` |
| Items to be sold or items requested for donation | : | , |
| Beneficiary/sport of fundraising activity: | | |
| Anticipated profit and plans for excess funds: Physical Education and activities | | |
| and awards. Date(s) scheduled: | | |
| Names of adult supervisors at activity (chaperon | nes, custodians, etc.): | |
| | | |
| Sponsor | | Date |
| Principal Approved Principal Approved SBDM Council (If Council Policy) | Not Approved ubbii | 6/10/24 Date Date |

| School | GF5 |
|---|---|
| Activity Account | |
| External Support/Booster Organization | |
| Name of Fundraiser | Jumphop or Heart |
| Website (if applicable) | 1 1 0 |
| Sponsor | |
| Date Submitted | |
| Purpose of fundraising activity: Donation to Th | · Anunican Heart |
| Association. | · |
| Items to be sold or items requested for donation: | |
| Beneficiary/sport of fundraising activity: | |
| Anticipated profit and plans for excess funds: | |
| | |
| Date(s) scheduled: 2024 - 202 | 5 |
| Names of adult supervisors at activity (chaperon | es, custodians, etc.): |
| | |
| Sponsor | Date |
| Principal Sprom Council (If Council Policy) | Not Approved Welshi White Wate Wate Date |

| School | GES |
|--|--|
| Activity Account | |
| External Support/Booster Organization | |
| Name of Fundraiser | Year book Sales |
| Website (if applicable) | |
| Sponsor | |
| Date Submitted | |
| | ncinitives. |
| Beneficiary/sport of fundraising activity: | |
| Anticipated profit and plans for excess funds: For Students rewa | rds. |
| Date(s) scheduled: Spring 202 Names of adult supervisors at activity (chaperon | es, custodians, etc.): |
| Sponsor Circle One: Approved Principal SBDAY Council (If Council Policy) | Date Sold Approved Sold A |
| | Board Approval Date (if applicable) |

| School | GES | |
|---|---|--|
| Activity Account | | |
| External Support/Booster Organization | | |
| Name of Fundraiser | Amazon Teachers Wish List | |
| Website (if applicable) | | |
| Sponsor | | |
| Date Submitted | | |
| Purpose of fundraising activity: For pavents to be | e able to buy supplies to | |
| For their Stude | nts Class room. | |
| Items to be sold or items requested for donation: | | |
| Beneficiary/sport of fundraising activity: | | |
| Anticipated profit and plans for excess funds: | | |
| Date(s) scheduled: All of 2021 | 4-2025 | |
| Names of adult supervisors at activity (chaperones, custodians, etc.): | | |
| Spanson | Date | |
| Sponsor Circle One: Approved Principal SBDAL Council (If Council Policy) | Not Approved White Date Date Date Date | |

| School | GES . |
|---|---------------------------------------|
| Activity Account | PTO |
| External Support/Booster Organization | |
| Name of Fundraiser | Candy bar sales. |
| Website (if applicable) | 5 |
| Sponsor | GES PTO- Liz Morgison |
| Date Submitted | 9 |
| Purpose of fundraising activity: Raising Money F | or GES students: activities |
| and incintives. | |
| Items to be sold or items requested for donation: | |
| Beneficiary/sport of fundraising activity: | |
| Anticipated profit and plans for excess funds: | , |
| S-4 | |
| Date(s) scheduled: Sept. 202 | .4 |
| Names of adult supervisors at activity (chaperon | es, custodians, etc.): |
| | |
| Sponsor | Date |
| Principal SBDM Council (If Council Policy) | Not Approved Sight Cubb Date Date |