

FUND RAISING FORM
Simpson County Schools

School: Franklin-Simpson Middle School

Activity Fund: PTO

Sponsor: FSMS PTO

Date Submitted: 8/22/24

What grade range will be involved in this activity? 6-8

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: _____

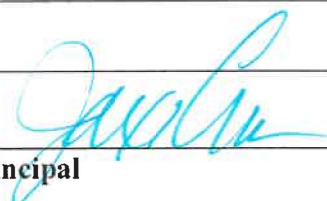
Describe Activity: Fall apparel sales ; dances/events ;
chocolate sales ; other sales (TBD)
class shirts

Beneficiary of fund raising activity: Students and faculty

Place of Activity: _____

Date(s) of Activity: Sept 3-17 Time(s) of Activity: _____

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

 8/6/24
Principal Date

SBDM Council (if Council Policy) Date

Superintendent 8-22-24
Date

Board Approval Date _____ Not Approved