

Fundraiser **Request** Form

Paul VI Catholic High School

Complete and return this form to the Advancement Office.
Each activity must have an individual form submitted for approval.

Duplicate if necessary

Name of organization/team/club _____

Coach/Moderator/Leader _____

Proposed Fundraising Activity (be specific):

Exact Date(s) of Proposed Activity: _____

Amount you expect to raise: \$ _____

Purpose of this fundraiser (include where money will be spent/donated):

I understand that this form must be completed, signed, and submitted to the Advancement Office. Failure to do so may result in denial of the activity or financial penalty. I further understand that my organization may not conduct fundraising activities without the prior approval.

I will submit a Financial Report Form within one week of the completion of this activity.

Moderator/Coach/Director signature _____ Date _____

Building Available? _____ yes _____ no _____ off campus

Dir. of Student Activities Signature: _____

____ Approved _____ Not approved

Principal or Advancement Director Date _____

Comments:

It is your responsibility to keep a copy of this form for your records

Fundraiser **Financial Report Form** Paul VI Catholic High School

Complete and return this form to the Development Office within one (1) week of the completion of your fundraising activity.

Duplicate if necessary

Name of organization _____

Coach/Moderator/Leader _____

Fundraising activity:

Exact Date(s) of Activity: _____

Gross amount raised: \$ _____

Cost of activity: \$ _____

Net income: \$ _____

Describe how the money (Net Income) is to be spent:

I understand that this form must be completed, signed, and submitted to the Development Office within one (1) week of the completion of the fundraising activity.

Failure to do so may result in denial of future activities and/or financial penalty.

Moderator/Coach signature _____

Date _____

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