



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): S. Daly Date: 11/13/24

Club Name: UHS Softball

Acct. No.: 3340 Acct. Balance to Date: _____

Type of Fund Raiser: Dress Down

Purpose of Fund Raiser: Raise money for end of the year events

Start Date of Project: 12/10/24 Completion Date of Project: 6/30/25

Date of Sale(s): From 12/10/24 To: 6/30/25

Sale Area/Location: UHS

Sale will be monitored by: S. Daly

***** ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD *****

Vendor Representative's Name: _____

Vendor Business Name: _____

Vendor Address: _____

City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ _____

Proposal Sale Price: \$ _____

Total Cost of all Products Not to Exceed: \$ _____

Minimum Total Profit Expected: \$ _____

Faculty Advisor Signature

Signature: [Signature] Date: 11/13/24

Vice Principal Signature

Signature: [Signature] Date: 11/15/24

School Treasure Signature

Signature: [Signature] Date: 11/15/24

Placed on BOE Meeting Agenda for:

Month: _____ Year: _____ Approved: YES NO By: _____