

**Leesville High School REQUEST**

**FOR FUND RAISER**

Teacher/Sponsor's Name: \_\_\_\_\_

Club/Organization: \_\_\_\_\_

Requested Date(s) For Fund Raiser: From \_\_\_\_\_ To \_\_\_\_\_

Product Or Item(s) To Be Sold: \_\_\_\_\_

Approximate Sales Price Per Item, If Known: \_\_\_\_\_

How Much Profit You Expect From Fund Raiser: \_\_\_\_\_

Reasons For Fund Raiser: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please explain details of this requested fund raising project, such as a specific location for selling goods or collecting funds, consequences of falling short of the anticipated profit goal, disposition of unsold products, etc. You may attach another sheet if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Requested By:

\_\_\_\_\_  
Signature Teacher/Sponsor

\_\_\_\_\_  
Signature of Club President

Request Approved \_\_\_\_\_ or Disapproved \_\_\_\_\_

\_\_\_\_\_  
Signature of Principal or Designee

\_\_\_\_\_  
Date

