## Fundraiser Number MUSTANG PUBLIC SCHOOLS Fundraiser Request Form

## School Name

## School Year

## ALL FUNDRAISING MONEY MUST BE BOARD APPROVED ALL FUNDRAISERS MUST BE ASSIGNED A NUMBER

The following information **must** be completed and submitted to the appropriate Activities director/Principal for approval and then send to the Finance Department ATTN: MPS Activity Funds at the Administration Building (MERC).

Date	Site #
Group: Acco	ount # Location:
Beginning date of sale:	Ending date:
Purpose of fundraiser:	
Description of fundraiser:	
Address:	
Method of payment: Pre-order	Consigned Purchased
Sales goal \$% I	Profit
Facility being used (if applicable):	
Sponsor Name (Please print)	Director/Principal Name (Please print)
Sponsor Signature Di	rector/Principal Signature
Executive Director of Education	Approved Signature Disapprove
	Date

Please use this number on all requisitions and invoices connected to this fundraiser.