



MONTEBELLO HIGH SCHOOL ASSOCIATED STUDENT BODY

Request for Fundraiser Approval and Revenue Projection

Fiscal Year: _____ (ex. 2019-2020)

Note: To be approved, applications must be submitted at least two (2) weeks prior to requested date.

Club/Organization Name: _____ Date form submitted: _____

PROPOSED ACTIVITY:

Name of activity or type of fundraiser: _____

Location of activity:

Off-Campus Where? _____

On-Campus Where? _____

Description of items to be sold: _____

Date of activity:

First choice: _____ Alternate date: _____

Time of activity: From _____ a.m./p.m. To: _____ a.m./p.m.

Selling price: \$ _____

Cash box required? Yes No

Number of items purchased for sale: _____ @ \$ _____ each = \$ _____

How much income is anticipated? \$ _____

How much expense is anticipated? \$ _____

How will profit be used? _____

Approval

Submitted and Approved by:

Student Club Representative: _____
Signature, Title and Date

Club Advisor: _____
Signature, Title and Date

SUBMIT THIS FORM TO PRINCIPAL FOR APPROVAL IN A-1

FOR ASB USE ONLY

Principal Recommendation: Yes No

Approved by:

Principal: _____
Signature and Date

ASB Approval: Yes No

ASB Representative: _____
Signature, Title and Date

Recorded in ASB Student Council Minutes on: _____
Date

Reason for disapproval, if applicable: _____

Date recorded on fundraising calendar: _____

Date Revenue Analysis is due: _____

Note: Fundraiser Event Profit Analysis form is due with deposit within two weeks after close of activity/fundraiser.