

**Fund Raising Activity Request Form
Activity Funds Plan and Report**

Today's Date: 09/17/13

Complete one form for each activity your class/club/organization is planning.

Class/Club/Organization making request: JH Music Department

The above group is requesting permission to conduct the following activity in compliance with the extra-curricular activity procedures, regulations and policies of the **Homer Central School District**. All receipts and disbursements of funds will be made in accordance with the **Homer Central School District** procedures, regulations and policies.

Activity Planned: Cherrydale Frozen Foods Fund Raiser

Indicate one: Fund raising Service Project Other

Activity Dates: Begin 10/02 End 10/18 Subject to Sales Tax: Yes No

		Projected (Prior)	Actual (after)
Expenses (Costs)			
1.	<u>Food Cost</u>	\$ <u>5900</u>	\$ _____
2.	_____	\$ _____	\$ _____
3.	_____	\$ _____	\$ _____
4.	_____	\$ _____	\$ _____
5.	_____	\$ _____	\$ _____
Receipts (Income)			
1.	<u>Food Gross</u>	\$ <u>9800</u>	\$ _____
2.	_____	\$ _____	\$ _____
3.	_____	\$ _____	\$ _____
Profit (Receipts minus Expenses)		\$ _____	\$ _____

The student officers of the above names Class/Club/Organization understand the above activity and assume responsibility for its fiscal conduct.

Faculty Advisor: [Signature]
(Signature)

Date: 9/17/13

Student Treasurer: Anthony Parker
(Signature)

Date: 9/19/13

Approved Denied
Principal - Chief Faculty Advisor: [Signature]

Date: 9/17/13

- ***After the activity/sale:
1. Record actual expenses, receipts and profit
 2. Record on the back of this form names of students who did not turn in the \$
 3. Give a copy of this form to the Central Treasurer