

Exhibit - Request for Establishment of Student Activity Fund

To be submitted to the Business Manager

Permission is hereby requested to establish a Student Activity Fund for the purposes below:

School Name NCHS

Student Activity Fund Name ~~Global Medical Squad~~ High School Alliance of Future Physicians (HSAFP)

To be completed by Accounting Department:

Account Number - Revenue \_\_\_\_\_

Account Number - Expenditure \_\_\_\_\_

1. The purpose of the proposed Student Activity Fund is House funds to donate to medical type facilities (St Jude, Ronald McDonald house)

2. Income in support of this Student Activity Fund will be obtained from the following sources:

Fundraisers and donations

3. Expenditures from this Student Activity Fund will be for these purposes: \_\_\_\_\_

Donations, purchase supplies for fundraisers

4. Authorized Signatures:

The following individuals are authorized to initiate expenditures from this fund:

N/A  
Student Representative

[Signature]  
Faculty Advisor

5. Other Comments: \_\_\_\_\_

[Signature]  
Principal

This request was approved by the Board of Education on \_\_\_\_\_

\_\_\_\_\_  
Business Manager

\_\_\_\_\_  
Date

**Exhibit - Request for Establishment of Student Activity Fund**

*To be submitted to the Business Manager*

Permission is hereby requested to establish a Student Activity Fund for the purposes below:

School Name Oakdale Elementary

Student Activity Fund Name PBIS

**To be completed by Accounting Department:**

Account Number - Revenue \_\_\_\_\_

Account Number - Expenditure \_\_\_\_\_

1. The purpose of the proposed Student Activity Fund is to keep track of funds specifically  
used for PBIS activities.

2. Income in support of this Student Activity Fund will be obtained from the following sources:  
donations from various businesses and organizations within the community.

3. Expenditures from this Student Activity Fund will be for these purposes: panther cart  
purchases, Panther Den Programs, Panther Paw winners

4. **Authorized Signatures:**

The following individuals are authorized to initiate expenditures from this fund:

N/A Christ Stewart  
*Student Representative* *Faculty Advisor*

5. Other Comments: \_\_\_\_\_

Sam Taylor  
*Principal*

This request was approved by the Board of Education on \_\_\_\_\_

\_\_\_\_\_  
*Business Manager* *Date*