Westwood High School UNDRAISER FORN

WESTWOOD INDEPENDENT SCHOOL DISTRICT Authorization to Conduct Fund Raising Event

Organization: School Nursing Staff Organization: benefit Blankets Bear Campus: H	S Date submitted to (29/25
Fundraising Event: Pass the No.	+"	
Requested fundraising date/dates: Vendor (if applicable)	two Baskethall	Games
Vendor (if applicable)		h Sc
		High
Address City/State	Telephone ha D.M.	lavy 0
List specific items that will be sold: Pass the Net w	fans instands for done	chous o
Price per item: \$ what ever there Will customer p Ou donation on one Profit to organization should never be less that 50%; other	ay in advance? No	Westwood shoot
What will money raised from this fundraiser be used for? Money raised will go directly to "Blankets & Bears"		
If NO vendor is involved; list location of event:		
Estimated cost to organization to start fundraiser \$		
How much will you charge your customer? \$	Will you accept donations?	
I, Lynthia Garza, am submitting this fund-raisi funds. I understand that I am held responsible for ordering and distribusion submitting funds to the office, to be deposited in my activity account. complete this form and return to the campus office. PERMISSION IS GRANTED TO CONDUCT THIS E	With the conclusion of this fund raiser, VENT:	I will
	D Superintendent's Signature D	ate
Total Proceeds collected \$		
Total Deposited in activity account \$To	tal invoice from vendor \$	
Expenses incurred for a successful fundraiser \$	(advertising, t-shirts, sup	plies, etc.)
Total Profit my organization benefitted from this fundraiser \$		
1,, understand that these funds vand returned to the campus office	vill not be available until this form is	completed