

**Brownwood Independent School District  
Authorization to Conduct a Fund Raiser Form**

**General Information:**

Campus: BMS Club: NJHS

**Fund Raiser Information:**

Fund Raiser Title: Boo Bash 10/30/2021

A. What type of merchandise or service will be sold or provided?  
cookies + brownies

B. Will food be sold that will be consumed during school hours? ( ) Yes (  ) No  
If so, is the item(s) listed on the preapproved food list? ( ) Yes ( ) No

C. How will the merchandise or service be sold or provided (e.g. catalog sales, individual sales to students on campus, prepaid orders, etc.)?  
individual sales

D. Vendor \_\_\_\_\_ Representative \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_

E. Fund raiser will be conducted from 10/21 to 10/21  
(Month/Year) (Month/Year)

F. Funds generated will be used for purchasing supplies to donate items for teacher "Go Bags"

**Projected Sales and Expenses:**

Total Projected Sales	\$ <u>\$ 100</u>
Total Projected Expenses	\$ <u>-</u>
Projected Net Profit	\$ <u>\$ 100</u>

**Sponsor Certification:**

I hereby certify that a profit/loss statement will be completed and submitted to the campus principal within 30 days after the termination of the fund raising activity. In addition, I certify that all monies collected will be deposited to the campus secretary/bookkeeper in accordance with the district's cash handling procedures.

Sponsor's Signature: Muledy Smith Date: 9/29/21

**Authorization:**

(  ) Approved Principal: Jordan Richert  
( ) Disapproved Date: 9/29/21

Board Approval Date: \_\_\_\_\_

**Brownwood Independent School District  
Authorization to Conduct a Fund Raiser Form**

**General Information:**

Campus: BMS Club: NJHS

**Fund Raiser Information:**

Fund Raiser Title: Dance

A. What type of merchandise or service will be sold or provided?  
drinks, snacks, admission

B. Will food be sold that will be consumed during school hours? ( ) Yes (  ) No  
If so, is the item(s) listed on the preapproved food list? ( ) Yes ( ) No

C. How will the merchandise or service be sold or provided (e.g. catalog sales, individual sales to students on campus, prepaid orders, etc.)?  
individual sales

D. Vendor \_\_\_\_\_ Representative \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_

E. Fund raiser will be conducted from 12/2021 to 12/2021  
(Month/Year) (Month/Year)

F. Funds generated will be used for service projects

**Projected Sales and Expenses:**

Total Projected Sales	\$ <u><del>500</del> 1000</u>
Total Projected Expenses	\$ <u>500</u>
Projected Net Profit	\$ <u>500</u>

**Sponsor Certification:**

I hereby certify that a profit/loss statement will be completed and submitted to the campus principal within 30 days after the termination of the fund raising activity. In addition, I certify that all monies collected will be deposited to the campus secretary/bookkeeper in accordance with the district's cash handling procedures.

Sponsor's Signature: Melody Smith Date: 9/29/21

**Authorization:**

(  ) Approved Principal: Janet Richer  
( ) Disapproved Date: 9/29/21

Board Approval Date: \_\_\_\_\_

**Brownwood Independent School District  
Authorization to Conduct a Fund Raiser Form**

**General Information:**

Campus: BMS Club: NJHS

**Fund Raiser Information:**

Fund Raiser Title: Dance

A. What type of merchandise or service will be sold or provided?  
Admission, Snacks, drinks

B. Will food be sold that will be consumed during school hours? ( )Yes ( )No  
If so, is the item(s) listed on the preapproved food list? ( )Yes ( )No

C. How will the merchandise or service be sold or provided (e.g. catalog sales, individual sales to students on campus, prepaid orders, etc.)?  
Individual Sales

D. Vendor \_\_\_\_\_ Representative \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_

E. Fund raiser will be conducted from 2/2022 to 2/2022  
(Month/Year) (Month/Year)

F. Funds generated will be used for service projects

**Projected Sales and Expenses:**

Total Projected Sales	\$ <u>1000</u>
Total Projected Expenses	\$ <u>500</u>
Projected Net Profit	\$ <u>500</u>

**Sponsor Certification:**

I hereby certify that a profit/loss statement will be completed and submitted to the campus principal within 30 days after the termination of the fund raising activity. In addition, I certify that all monies collected will be deposited to the campus secretary/bookkeeper in accordance with the district's cash handling procedures.

Sponsor's Signature: Melody Smith Date: 9/29/21

**Authorization:**

(  ) Approved Principal: Sandra Richardson  
( ) Disapproved Date: 9/29/21

Board Approval Date: \_\_\_\_\_