

SCHOOL ACTIVITY FUND FUNDRAISER APPROVAL

School	CCMS
Activity Account	Principal / Renaissance
External Support/Booster Organization	
Name of Fundraiser	T-Shirts
Sponsor	Dana Oak
Date Submitted	9-4-19

Purpose of fundraising activity:

Raise funds for Clubs, Awards, Rewards, field trips, etc, School wide

Items to be sold:

Custom CCMS Tshirts

Beneficiary of fundraising activity:

Principal and or Renaissance Acct.

Date(s) scheduled:

9-4-19 - End of Year.

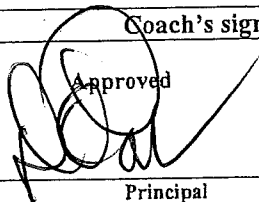
Names of adult supervisors of activity (chaperones, custodians, etc.):

D. Oak

Athletic Fundraiser	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes, sport involved:		
Corresponding sport participating in fundraiser?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Coach's signature (corresponding sport)	Date	

Circle One:

Approved



Disapproved

Date: _____

Principal

Date

SBDM Council (if council policy)

Date

Superintendent as directed by Board
(If School-Wide fundraiser)

Date