

**Baltimore County Public Schools
School Fund Raiser Data Form**

All fund raising activities must be approved by the Principal prior to the activity.

The fund raiser activity should be designed to generate a profit by providing products, services, donations, or contributions which support the school program. The fund raiser must be for a specific, advertised purpose that benefits students. The profit, donation or contribution must be used for this purpose.

The intent of each fund raiser, and how the funds will be spent, must be communicated to the school and community in the form of an additional flyer or disclaimer attached to the fund raising materials or posted to the school website and must not be used to subsidize the school's operating budget. Enclose a copy of the communication that will be used with this permission request form.

All funds generated must be used for the stated purpose by the end of the fiscal year in which they were generated. Funds generated by students should be spent on activities to benefit those students. The only exception to this rule would be fund raising activities for large dollar amount purchases for which funds will be raised over several fiscal periods. These fund raisers must be advertised as such.

Fund Raising Sponsor _____ Grade Level _____ Collecting Money Yes No

Name of Fund Raiser Company _____

Contact at Fund Raiser Company _____ Contact Email address _____

Type of Fund Raiser _____

Is this a web-based fund raiser? Yes No

Will funds be deposited by electronic transfer from the fund raising company? Yes No

Start date of fund raiser _____ End date of fund raiser _____

Expected date of delivery _____ Location _____

Pick up start time _____ End time _____ If unable to pick up _____

THIS INFORMATION IS ALSO FOR FRONT OFFICE USE. IF THESE DATES CHANGE, PLEASE INFORM THE FRONT OFFICE AS SOON AS POSSIBLE.

Purpose of fund raiser _____

School activity which will benefit students for which funds will be used _____

Targeted date for use of funds raised _____

Cost of product/service _____ Projected profit _____

Name of person or organization providing reference:

Reference #1: _____

Reference #2: _____

Is this an approved, community based fund raiser? Yes No

Name of charitable or non-profit organization funds will be remitted to: _____

School Funds Online (SFO) Account name/number to be used _____

Sponsor signature _____

Fund raiser has been added to _____ calendar (Signature) _____ Date _____

APPROVAL AREA (To be completed by Principal)

Approved

Not Approved

Reason not approved _____

Principal's Signature _____ Date _____

Upon completion of fund raiser, please review and sign the detail ledger report provided by the administrative secretary or fiscal assistant (bookkeeper) and retain with approval form.