

ARROYO HIGH SCHOOL

FUNDRAISER REQUEST FORM

Today's Date: _____ Requisition#: _____ (an Activities Requisition form must accompany this request)

Club/Sport Name: _____ Advisor/Coach: _____

Date to begin: _____ Date to end: _____ Status of Event: _____ New _____ Old

The following club/sport would like to get the approval of the ASB Commission to run the following fundraiser:

Type of Fundraiser: _____

How will profit be used: _____

REVENUE POTENTIAL

Vendor: _____

of Items to sell: _____ Selling Price per Item \$: _____

Estimated Expenses \$: _____ Estimated Profit \$: _____

Advisor/Coach Signature: _____

President/Captain Signature: _____

Advisor/Coach of conflicting event: _____

ASB COMMISSION RECOMMENDATION

APPROVE

DISAPPROVE

POSTPONE

ASB Meeting Date: _____ ASB President: _____

Asst. Principal, Student Affairs: _____

FOR 2ND APPROVAL ONLY: Please indicate changes to this Fundraiser Request:

ASB Meeting Date: _____ ASB President: _____ APSA: _____

SALES ANALYSIS

Club/Sport Name: _____

Number of Items for sale: (A) _____

Selling Price per Item: (B)\$: _____

Potential Revenue (A x B) (C)\$: _____

Total deposit turned in: (D)\$: _____

Cash overage/shortage (C-D): (E)\$ _____

Total Expenses Receipts/Invoices: (F)\$: _____

Profit/Loss: (D-F) \$: _____

Explanation of Difference:
