(A) Extraclassroom Fundraising Approval Form

(B) Profit and Loss Statement

(A) Today's Date: __________________________

Complete one form for each activity your class/club/organization is planning.

Class/Club/Organization: __________________________

The above is requesting permission to conduct the following activity in compliance with the extraclassroom activity procedures, regulations and policies of Onondaga-Cortland-Madison BOCES. All receipts and disbursements of funds will be made in accordance with Onondaga-Cortland-Madison BOCES procedures, regulations, and policies.

ACTIVITY PLANNED: __________________________

Indicate one: FUND RAISING EVENT SERVICE PROJECT OTHER

Projected (prior) $ __________________________ Actual (after) $ __________________________

Revenues (Income) $ __________________________ $ __________________________

Expenses (Costs) $ __________________________ $ __________________________

PROFIT (Receipts minus Expenses) $ __________________________ $ __________________________

The student officers of the above names Class/Club/Organization understand the above activity and assume responsibility for its fiscal conduct.

Faculty Advisor: __________________________ Date: __________________________

(Student Signature)

Student Treasurer: __________________________ Date: __________________________

(Student Signature)

Approved Denied

Assistant Superintendent: __________________________ Date: __________________________

(Student Signature)

COMPLETE ACTUALS AT CLOSE OF FUNDRAISER AND RETURN THE YELLOW AND PINK COPY TO THE ASSISTANT SUPERINTENDENT

FORM COMPLETION:
1. Prior to Beginning Sales - Complete Section A and B (projected column only)
2. Submit ALL three copies to Assistant Superintendent
3. Yellow & Pink copies will be returned to you with approval
5. Submit Yellow copy to Assistant Superintendent by designated date
6. Retain Pink copy for your records