



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Omar Wright Date: 10/30/24

Club Name: Girls Basketball

Acct. No.: 3320 Acct. Balance to Date: _____

Type of Fund Raiser: Online Fundraiser

Purpose of Fund Raiser: off Season Training, Basketball Leagues.

Start Date of Project: December 2, 2024 Completion Date of Project: March 3, 2025

Date of Sale(s): From 12/2/2024 To: 3/3/2025

Sale Area/Location: _____

Sale will be monitored by: Omar Wright

***** ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD *****

Vendor Representative's Name: Evan Okamoto

Vendor Business Name: Leading Edge

Vendor Address: 3315 Williams Blvd SW Suite #2-319

City: Cedar Rapids State & Zip code: IA 52404

Unit Cost of Product/Service: \$ Donations

Proposal Sale Price: \$ _____

Total Cost of all Products Not to Exceed: \$ _____

Minimum Total Profit Expected: \$ 1500

Faculty Advisor Signature

Signature: Wright Date: 10/30/24

Vice Principal Signature

Signature: _____ Date: 10/30/24

School Treasure Signature

Signature: Anna Brans Date: 10/30/24

Placed on BOE Meeting Agenda for:

Month: _____ Year: _____ Approved: YES NO By: _____