

[NAME OF SCHOOL] STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Julia Saladino Date: 7/28/25

Club Name: Key Club

Acct. No.: 46 Acct. Balance to Date: —

Type of Fundraiser: Snack Selling

Purpose of Fundraiser: Fundraise money for annual DECON convention

What are you selling? snacks

Start Date of Project: Sept 2025 Completion Date of Project: June 2026

Date of Sale(s): From Sept 2025 To: June 2026

Sale Area/Location: Front of School

Sale will be monitored by: Julia Saladino

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

Vendor Representative's Name: —

Vendor Business Name: —

Vendor Address: —

City: — State & Zip code: —

Unit Cost of Product/Service: \$ —

Proposal Sale Price: \$ —

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

Minimum Total Profit Expected: \$ —

Faculty Advisor Signature

Signature: Julia Saladino Date: 7/28/25

(Vice) Principal Signature

Signature: Michael Boscard Date: 7/25/25

School Treasure Signature

Signature: W. M. [Signature] Date: 7/30/25

Placed on BOE Meeting Agenda for:

Month: — Year: — Approved: YES ☐ NO ☐ By: —