

FUNDRAISING PROPOSAL – CLUB FUND

Be sure to complete this form fully - incomplete forms will be returned to the club unsigned and will delay approval.

YOU SHOULD HAVE THIS FORM TURNED IN A MINIMUM OF 2 WEEKS PRIOR TO THE FUNDRAISING EVENT.

	(Food sales – indicate what type of food must have safe food handler training ar Name of certified Safe Food Handler: _	nd must check with th	e City for relevant food permit.)	
	Proceeds will be used for			
	Date of event/activity:			
	Club president(Please prin	nt)	Phone	
	Club advisor(Please prin	nt)	Phone	
	Area to be used:			
Will this fundraising activity include a RAFFLE? Yes No				
	If Yes, STOP . All raffle revenue and exp 3629. For all other fundraising activities		ough the AHC Foundation, ext.	
			ough the AHC Foundation, ext.	
	3629. For all other fundraising activities	er item x # of items): # of items # of items	= gross revenue = gross revenue	
	3629. For all other fundraising activities Budget for activity – complete fully: Expected gross revenue (sales price per Sales price per item x Sales price per item x	er item x # of items): # of items # of items	= gross revenue = gross revenue	
	3629. For all other fundraising activities Budget for activity – complete fully: Expected gross revenue (sales price per Sales price per item	er item x # of items): # of items # of items # of items	= gross revenue = gross revenue = gross revenue \$ v): Donated? Yes No Donated? Yes No	
	3629. For all other fundraising activities Budget for activity – complete fully: Expected gross revenue (sales price per Sales price per item	er item x # of items): # of items # of items # of items # of items # of items Cost per item: Cost per item:	= gross revenue = gross revenue = gross revenue \$ v): Donated? Yes No Donated? Yes No	



FUNDRAISING PROPOSAL – CLUB FUND, cont'd.

For food sales	s:	Food Court Manager or designee mu	st sign.
College Board	d of Trustees, and all district office cost or expense that may arise du	ncock Community College District, the Allan Haners, agents, and employees free and harmless frouring or be caused in any way by such use or occ	om any
behalf of our sponsoring of Accounting S tickets and/or Student Acco	organization to abide by and enfo f this fundraising event/activity. All ervices office and the club treasur funds collected within three work unts Office. In addition, the club o	for certify that we shall personally be responsible arce the rules and regulations of the college gover I funds collected will be deposited in the Auxiliary arer or designee shall provide a financial report or cing days after the fundraising event/activity to the officer and advisor agree that any monetary loss a sufficient funds are available to cover any monet	rning the r n all e will be
Club presider	nt's signature:	Date:	
Club advisor's	s signature:	Date:	
************** Project Direct	tor, Student Activities & Outreach:	:Date:	***
Recommenda	ation: Approve Disappro	ve	
Assoc. Supt./	VP, Student Services	Date:	
If disapproved	d, please state reason(s):		
			_
Distribution:	Auxiliary Accounting Services, Bldg. B Student Activities Office, Bldg. G 105A Food Court Manager (only if food involved	(original)	