

Approved  
1-10-18  
FILE: IGDF-AF  
Critical

**STUDENT FUNDRAISING**  
(Fundraising Approval Form)

Name of Employee Supervising Fundraising Activity: Angela Lea

Group or Activity: Cheer Grade Levels Involved: 9-12

Dates of Fundraising Activities: 3/13-3/27 Anticipated Profit from Fundraiser: \$ 100/girl

Explain how funds will be used. Applied to camp and spirit wear fees to cut individual costs.

Describe the fundraising activity, including a description of items to be sold and the amount for which they will be sold. (Attach brochures or other information to this form if necessary.)  
cookie dough, pastries, pizza, soups, bath bombs, face masks (brochures attached)

List the vendors involved, including address and contact information of representatives.  
Jenny Kemper w/ Choice Products Inc  
Fall Place, Washington  
(A+ Fundraising, Inc) 0413-636-9313

Describe up-front money or other necessary commitments of district resources. None

Is there a risk that the district could lose money? If so, explain. NO

Who is the target customer? family members and friends

Will students, staff or others be solicited on school property? If so, explain how and when.  
Cheerleaders may ask staff to purchase items.

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Will students be involved in the fundraiser? If so, explain their role and include an estimate of the amount of instructional time, if any, that will be used to implement the fundraiser. Yes, they will be collecting orders. This should not take any instructional time.

Will staff members other than yourself be involved? If so, explain how they will be involved and include an estimate of the time during their working hours that they will be involved. Renee Schleicher, JV coach; no time during work hours

Will the fundraiser be advertised? If so, how? Word of mouth

Describe the method of collecting and securing funds, including a description of how sales and receipt of funds will be documented and how the risk of theft will be minimized. Gifts will be issued receipts for money turned in. Money will be secured in office.

Will the district need to sign a contract?  Yes  No Agreement attached

If yes, attach the contract to this form for review and Board approval.

Does the fundraiser comply with the district's wellness program and procedures implementing that program? (See ADF, ADF-AP.)  Yes  No

List any other information regarding the fundraising activity. This fundraising activity has been completed in years past.

Angela Lea  
Signature of Supervising Employee

1-10-18  
Date

# Cookie Dough Program Agreement

Organization Name: Raytown South High School

Address: 8211 Sterling

City: Raytown Zip: 64138

Phone: 816 268 7330 Fax: 816 268 7345

## CONTACT INFORMATION

Primary Contact Angela Lea Day Phone 816 268 7330

Address: 8211 Sterling Evening Phone 816 803 4922

City: Raytown Zip: 64138 County: JACKSON

Cell Phone 816 803 4922

Email: angela.lea@raytownschools.org

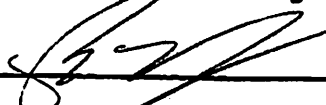
If Organization is tax exempt please check here  and send a copy of the current tax-exempt letter. Other wise you will be billed for sales tax.

Sale Dates Start 3/13-18 End 3/27-18 Turn in 4/2-18

Grade Levels: 9-12 Enrollment 30

This agreement acknowledges that (organization) RSHS Cheer will participate in (year) 2018 and offer a Premium Frozen Foods program. We understand and agree to all terms.

Terms: Payment due upon delivery. Orders over 350 units will arrive on a frozen truck, smaller orders will be delivered by the rep, delivery will be \$25 or the order can be picked up at our local warehouse for no charge. AL (Initial)

Authorized Signature 

Printed Name and Title BRIAN HUFF Date 1/18/18  
ASST. SUPERINTENDENT

Distributed by: Jenny Kempfer A+ Fundraising, Inc. Contact info 913-636-9313  
Email this completed form to jennykempfer@gmail.com or fax to 816-221-8423

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