



Karnes City Independent School District

FUND-RAISING APPLICATION FOR ACTIVITY FUNDS

This application must be properly approved prior to commencing fund-raiser

Date: _____ Campus: _____

Sponsor: _____ School Organization: _____

Vendor Name: _____

Purpose/ Plan of the Sale: _____

Location of the Sale: _____

Fund-raiser Beginning date: _____ Ending date: _____ Time: _____

This is the 1st 2nd fund raising activity for this club. (Clubs are limited to two fund-raisers per year)

All fundraising projects must follow the District administrative guidelines and must be submitted to the Business Office for approval prior to beginning **ANY** fundraisers. Food Fundraisers **MUST** adhere to our policy on foods of minimal nutritional value.

No selling is allowed during instructional time.

Estimate the following:

Cost per item/unit \$ _____

Estimated profit \$ _____

Is this sale taxable? Yes No

If taxable and if eligible, will this sale count as one of the two-tax free sale days? Yes No

I certify that I will exercise strict control over all products in my possession and will remit all collections to the secretary/bookkeeper. I will notify the Business Office promptly of all outstanding debts so that appropriate action may be taken. I agree to submit an Operating Report to the Business Office within 5 days after completion of this fund-raiser. I realize that any losses due to my failure to follow established rules and procedures may become my personal responsibility.

Sponsor Signature: _____ Date: _____

Approval at Campus Level: Approved Denied

Principal Signature: _____ Date: _____

If denied, reason: _____

Approval by Superintendent: Approved Denied

Signature: _____ Date: _____

If denied, reason: _____

Date receive by Business Office: _____



Karnes City Independent School District

Instructions for Completing Fundraising Application Form

These instructions are written as a guide to assist in the preparation of the application form. If you have any questions regarding these instructions or need assistance, please contact the Business Office.

Date – Enter the date of the application request.

Campus – Enter the name of the campus.

Sponsor – Enter the name of the club sponsor.

School Organization – Enter the name of the student organization.

Vendor – Enter the name and address of the vendor that will be used to purchase the product(s) that will be sold.

Purpose/Plan of the Sale- Enter a detailed purpose of the fundraiser and detailed explanation of how the funds raised will be spent on students/campus, etc. Any fundraiser for “trips” must have an approved field trip request form attached.

Location – Enter where the fundraiser will be conducted.

Fundraising dates – Enter the beginning and ending date of the fundraiser. This must be a specific date and not just the month, i.e. October 3, 2020-October 7, 2020. No fundraiser is allowed to extend beyond a one-week period.

Time – Enter the time the fundraiser will be conducted. This must be a specific not just before or after school, i.e. 4:30pm – 6:00pm. **No selling is allowed during instructional time.**

Estimated Profit – Enter the estimated amount generated from the fundraiser **after** all cost for inventory, advertising and invoices have been paid.

Sale Taxable – Please check the appropriate box