



CHARITABLE FUNDRAISER DECLARATION

1. _____ ASB intends to raise money for the
School Name
_____, a Charitable Private Non-Profit Organization.
Organization Name
2. Recipients of this donation will be the _____.
Organization Name
3. Our campaign is titled _____ (examples include *Hoops for Hearts, Jump Rope for Hearts, Tragedy Relief, Fire Survivor, etc...*)
4. Proceeds are non-associated student body funds to be held in trust (600 account in the Associated Student Body Fund) solely by the school district exclusively for the intended purpose. **All funds shall be collected and deposited in the district's bank account by the individual school (No exceptions will be granted).**
5. A "Fundraiser Approval Form" shall be submitted and remain on file at the individual school location. The current student council/principal/ASB advisor shall approve the fundraiser before it begins.
6. All funds will be handled in a manner consistent with ASB Fundraising Policy & Regulation No. 3530.

Principal *Date*

ASB President *Date*

ASB Advisor *Date*

Finance Administrator *Date*