

HARRISBURG SCHOOL DISTRICT

Request for Fund Raising Activity

Club or Organization: MMSA

Name of Company providing Product/Service: Box Top

Description of Product/Service: Parents/faculty will download app and scan receipts and if they are box top items we will get a percentage.

Purpose of Fundraiser: PBIS activity; honor roll, prizes, activities etc.

COST of Product/Service: N/A

SELLING Price: N/A

Fundraiser Start Date: 8/21/26

Fundraiser End Date: 10/30/27

All funds received will be deposited into the school account on a daily basis. All funds spent will be done so via a purchase order/check request. Any losses incurred as a result of this fundraising activity will be the sole responsibility of the Club and the Club sponsor.

Sponsor's Signature: [Signature]

Date: 8/21/26

Principal's Signature: [Signature]

Date: _____

Chief Financial Officer Signature: _____

Date: _____

(The CFO will sign the form once Board Approval is obtained and return a copy to both the Sponsor and the Principal. Once a fully signed form is received by the Club Sponsor, the fundraiser may proceed.)

Reconciliation

(A reconciliation must be received by the Business Office within 15 days of the end of the fundraiser.)

1. Total Money Collected from Fund Raiser \$ _____
2. Total # Items Purchased to Sell _____ x Cost per Item _____ \$ _____
3. Net Profit (Loss) to Club (Subtract line 2 from line 1) \$ _____
4. Surplus: # of Items in line 2 unsold _____

Please describe your plan for disposal of any surplus (unsold) items: _____

Sponsor's Signature: _____ Date: _____

Principal's Signature: _____ Date: _____