

Fundraiser Request Form

(Name of Organization)

Date submitted _____

Contact person _____ Phone Number _____

Item to be sold _____

Price of item: _____ Profit per item _____

Date sale begins: _____ Date sale ends: _____

Proceeds benefit: _____

Please Submit to:
Stewardship and Finance Committee
Scheduled meetings: 2nd Thursday of each month.
(Except June, July, August) .

Approved _____ Not Approved _____

Recommend the following Guidelines for Fundraisers:

- a. Church/ Community Oriented.
- b. Must be a member/or an affiliated group.
- c. No Raffle Tickets
- d. Submitted for approval
- e. Must be Non-profit