

POHATCONG SCHOOL

FUNDRAISER REQUEST

Class or Organization: _____

Teacher/Advisor: _____

Type of Fundraiser: _____
(Give Brief Description)

Will Storage Room Be Needed? _____

Cost of Items: _____

Company Involved: Name _____

Address _____

Phone _____

Length of Sale: From _____ **To** _____

Profit To Be Used For: _____

_____ **Approved**

_____ **Not Approved**

Superintendent's Signature **Date**