

**OREGON SCHOOL DISTRICT
 FUNDRAISING ACTIVITY REQUEST**

Please complete one form for each fundraising activity
 Requests must be submitted at least two weeks prior to the date of the activity.

Name of Organization	
Request submitted by	
Your address	
Your daytime phone	

Date(s) of Activity Please specify beginning and ending dates	
--	--

I. Please specify items to be sold (includes sales brochure, if available)	
II. Event planned (dance, dinner, etc.)	

Building Principal Approval	_____
-----------------------------	-------

FOR DISTRICT SERVICES OFFICE USE	
Date received:	Received by:

Your requested fundraising activity has been:

APPROVED

DENIED FOR THE FOLLOWING REASON

Date of Determination:

 Leslie Bergstrom, Superintendent