

Abingdon-Avon CUSD #276
Fundraiser Control/ Request Sheet

Organization _____ Date _____

Fundraiser _____

Funds Needed _____ Funds Expected _____

Inclusive Dates _____

VENDOR:

Company Name _____ Phone _____

Address _____

Salesman _____

Purpose of Fundraiser _____

Signature of Sponsor(s) _____

Signature of Principal _____ Date _____

_____ Granted _____ Denied

Reason for denial _____
