## MT. SAN ANTONIO COLLEGE

## **FUND-RAISER PROPOSAL REQUEST FOR STUDENT CLUBS**

Program Name:			
Description of Activity or Event: (Attach Proposed Advertisement, such as Flyer or Ticket)			
Purpose of Activity or Event:			
Proceeds to be Used For:			
Date of Activity:	Time of Activity: From:	To:	
•	Time of Activity.	10.	
Location of Activity:			
Responsible Employee(s):  Note: A copy of this completed and approved f	Phone Number: form must be attached to all deposits.		
ВІ	EFORE THE FUND-RAISER BEGINS		
Before the activity begins, review these items and control of the following checklist and related requirements in each item.			
<u>Mandatory</u>	<u>Optional</u>		
Use of Facilities Request Completed	Cash Box Needed (Complete "Request	Cash Box Needed (Complete "Request for Change Funds/Cash Box" Form)	
Proposed Budget Completed	Change Funds Needed (Complete "Re	quest for Change Funds/Cash Box" Form)	
Advertised as Fund-raiser			
Receipt Book or other cash handling method esta	ablished		
<ul> <li>3. Record all donations on the <i>Donation Information Form</i>.</li> <li>4. Ensure all revenue receipts are adequately secured at all time.</li> <li>Revenue: Provide a description of items to be sold or potential.</li> </ul>	PROPOSED BUDGET		
		= =	
		=	
		=	
Total Revenue:		= \$ -	
<b>Expenses:</b> Provide a description of anticipated expenses.		_	
		=	
		=	
		=	
Total Expenses:		= \$ -	
Note: Attach a separate sheet if needed.	APPROVALS		
Club Advisor:	Charles		
Discretes Charlest Life.	Signature	Date	
Director, Student Life:	Signature	Date	
Vice President, Student Services:	- <b>0</b>		
or Designee (Dean, Student Svcs)	Signature	Date	

Note: It is the Clubs responsibility to obtain signatures and return to Fiscal Services.