

Donation of items for Family Fundraising Credit

Your Name: _____ Date: _____

Family Name: _____ Grade: _____

____ **YES, apply the total of these receipts to my Family Fundraising obligation.**

____ **Yes, receipts are attached**

Amount: \$ _____

Generated for the success of what activity or event? _____

Item/Items purchased: _____

Staff Approval Signature

Event Chair

Please submit this complete form to the front office.