



BROWNSVILLE INDEPENDENT SCHOOL DISTRICT FUNDRAISER/SOLICITATION APPLICATION

Instructions: This form shall be used for all fundraising activities or solicitation of funds. Before any activity has begun, the principal and area asst. superintendent **must sign** this form authorizing the organization to proceed with the project. By signing this form, the area asst. superintendent, principal, and sponsor acknowledge that they are familiar with all District's policies regarding the sale of merchandise and/or ***food products**. For the sale of **any kind of food product**, this application must be submitted **first** to Food & Nutrition Services **prior** to the area asst. superintendent. After approval, FNS will forward the application to the corresponding area asst. superintendent. The organization and/or club are responsible to collect sales tax and accept any, and all, liability related to this fundraiser. In addition, within **ten** school days after completion of the activity, the sponsor will submit an operating report, along with **Form I** and **Form M**, if applicable, to bookkeeper or secretary. Failure to submit a completed operating report may affect approval of future fundraiser(s).

Today's Date: _____ Campus: _____

Club Name: _____ Fundraiser: _____

Sponsors Involved: _____ # Students Involved: _____ Location: _____

Explain fundraising/solicitation procedures: _____

SOLICITATION Purpose of project and/or solicitation (*ie: March of Dimes, Jump Rope for Heart, etc.*):

FUNDRAISER Explain how funds will be used to benefit students/school:

Type of Fundraiser: Catalog Sale Single Item Sale Concessions Donations Commissions

Fundraiser/Solicitation: _____ Is This Sale Taxable Yes
Start Date Time End Date Time No

**If taxable, will this sale count as one of the two tax-free sale days? Yes No Date: _____

Is this your 1st or 2nd tax-free sale? 1st 2nd Estimated Gross: _____ Estimated Net: _____

Vendor Name: _____ Vendor Representative: _____

Vendor Address: _____

Vendor telephone number: _____

By signing, I acknowledge I will comply with student activity procedures, guidelines and reporting.

Sponsor's Name Sponsor's Signature Date

Approved _____
 Denied _____
Principal's Signature _____ **Date** _____

Approved _____
 Denied _____
FNS Signature (Food Only) _____ **Date** _____

Approved _____
 Denied _____
AA Supt.'s Signature _____ **Date** _____

*Health permits must be attached for any sale/exchange of food products.

Please submit nutritional value to Food Service Dept. for approval.

**Clubs are allowed 2 one-day tax free sales for which sales taxes are not required to be collected. All other sales may be taxable. Please refer to the Texas State Comptroller's fundraising guidelines within the Finance Department website.