

# Fundraiser Request Form

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(Name of Organization)

Date submitted \_\_\_\_\_

Contact person \_\_\_\_\_ Phone Number \_\_\_\_\_

Item to be sold \_\_\_\_\_

Price of item: \_\_\_\_\_ Profit per item \_\_\_\_\_

Date sale begins: \_\_\_\_\_ Date sale ends: \_\_\_\_\_

Proceeds benefit: \_\_\_\_\_

Please Submit to:  
Stewardship and Finance Committee  
Scheduled meetings: 2nd Wednesday of the month.  
(Except June, July, and August).

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Approved \_\_\_\_\_ Not Approved \_\_\_\_\_

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**Recommend the following Guidelines for Fundraisers:**

- a. Church/ Community Oriented.
- b. Must be a member/or an affiliated group.
- c. No Raffle Tickets
- d. Submitted for approval
- e. Must be Non-profit