

STUDENT ACTIVITY PROPOSAL

ORGANIZATION TMS Student Council ACTIVITY Kona Ice

PURPOSE to raise money to donate later

STARTING DATE 9/3/25 ENDING DATE 9/24/25

Please complete section one or two below for all money you plan to collect from fundraisers, admissions, dues, fees, sales, tickets, etc.

Complete SECTION ONE for resale activities:

COMPANY & ADDRESS _____

COMPANY REPRESENTATIVE _____ PHONE NO. _____

ITEMS FOR RESALE	QUANTITY	UNIT PURCHASE PRICE	PROPOSED RESALE PRICE
_____	_____	@ \$ _____	@ \$ _____
_____	_____	@ \$ _____	@ \$ _____
_____	_____	@ \$ _____	@ \$ _____

Complete SECTION TWO for other activities:

DESCRIPTION OF REVENUE (please be specific) PROJECTED RECEIPTS

Kona Ice to come to TMS for 4 days in \$ 600.00

September (9/3, 9/10, 9/17, 9/24) \$ _____

_____ \$ _____

DESCRIPTION OF EXPENSES (please be specific) ESTIMATED COSTS

_____ \$ _____

_____ \$ _____

_____ \$ _____

Please use SIDE TWO of this form to reconcile your activity upon its completion. Admissions and ticket sales must be reconciled on a separate "Admission & Ticket Reconciliation" form. Concession stand sales must be reconciled on a separate "Concession Stand Reconciliation" form.

ADVISOR Alis J. Stone DATE 9-8-25

PRINCIPAL Mya Chle DATE 9-10-25

SUPERINTENDENT Jerry Dadee DATE 9/15/25

TREASURER'S OFFICE _____ DATE _____