

Holland Free Methodist Church

Fundraiser Request Form

Name of group: _____ Date: _____

Description of proposed fundraising project

Purpose of Project: _____

Starting Date: _____ Closing Date: _____

Location of sale or project: _____

Target group of buyers: _____

Who will do the actual selling or provide the service: _____

Financial Details

Initial Startup Costs: Total _____ Per Unit: _____

How will initial costs be funded? _____

Number of units to be sold or serviced: _____ Selling price per unit: _____

Projected total income: _____ Projected total expenses: _____

Projected Net Profit (Total income Total expenses = net profit) _____

Signatures

Request submitted by: _____ Date: _____

[] Approved [] Not approved (see back for explanation)

by _____ Date: _____

and _____ Date: _____