



Fundraising Request Form

Exhibit 805.1

Code: 1005.4-E1

Forms should be submitted to the Business Office per the following deadlines

Request Form Due	Board Approval Date	Fundraiser Start Date
First day of school for fundraisers occurring from October 1 st thru December 31 st	First meeting in September	Fundraisers should NOT start until the day immediately following board approval
Last day of school before Thanksgiving break for fundraisers occurring from January 1 st thru March 31 st	December meeting	
By February 15 th for fundraisers occurring from April 1 st thru May 31 st	March meeting	
By April 15 th for fundraisers occurring from June 1 st thru September 30 th	First meeting in May	

Building Name: Aquatic (ruter Sponsoring Group Girls 5/D)

Contact Name: Chris Fechuar Contact Phone: 447-3041

Contact Email: Aris. fechuar finnaur. 1612. ia. 11 District Account Code: 21. 0109. 1900. 920. 4871

Description of Fundraising Activity (All information is required for the request to be considered) Fundraising Activity:

Cirls Developmental Suin Caup Activity

Start/End Dates: July 7-10 + Aug 4-7 Estimated Proceeds: 42,500

Purpose/Use of Funds Raised (Must be specific):

Equipment, must during the Season, Insulfants (y-9a + Matrifical) from puration

REMINDERS: All groups are required to submit a request for each fundraiser to the Business Office specifying how all

funds raised will be spent. A Fundraising Project Summary (Refer to Policy 1005.4-E2) is due six weeks after the

fundraiser ends. Proceeds should be spent during the year funds are raised.

Administrator Approval:			
I approve that this request is necessary to prov	ride funds for the purpose	s described above.	
Building Administrator's Signature:		Date:	3/14/25

Business Office and Board Review/Approval:	
Business Office Review/Approval: Date:	
しらが25 Board Review/Approval:	
Date:	
Summary Due Date:	Revised: 6/22; 7/22



4/25

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Building Name: Linn-Mer High School Sponsoring Group: Girls Baskothall			
Contact Name: Chad Tompkins Contact Phone: (319) 730-/632			
Contact Email: Champkins linnmer. Kl2:ia.us District Account Code: 21.0109.1900.920.6811			
Description of Fundraising Activity (All information is required for the request to be considered)			
Fundraising Activity: Poster donations			
Activity Start/End Dates: Oct - Nov. 2025 Estimated Proceeds: \$250			
Purpose/Use of Funds Raised (Must be specific): Denorters will be used to purchase			
team posters.			
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ADENIANDE 3 II DESCRIPTIO II DESCRIPTIO II DESCRIPTIO II			
Administrator Approval:			
I approve that this request is necessary to provide funds for the purposes described above.			
Building Administrator's Signature: Date:			
SERVICION IN THE PRODUCTION IN			
Business Office and Board Review/Approval:			
Business Office Review/Approval:			
Board Review/Approval: Date:			
Summary Due Date:			



6/4/2550

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Building Name: Linn - Mar High School Sponsoring Group: Girls Basketball			
Contact Name: Chad Tempkins Contact Phone: (319) 730-1632			
Contact Email: Champkins @ Innmer. kl2.ja.u3)istrict Account Code: 21-0109.1900.920.6811			
Description of Fundraising Activity (All information is required for the request to be considered)			
Fundraising Activity: Apparel Sales			
Activity Start/End Dates: Def - Nov. 2025 Estimated Proceeds:			
Purpose/Use of Funds Raised (Must be specific): Proceeds will be used to pay for an			
extra coaching contract along with payment for the use of Hudi for the 25-26 season.			
UNITED SAGE OF THE SECOND SEED OF THE SECOND			
Administrator Approval: I approve that this request is necessary to provide funds for the purposes described above.			
Building Administrator's Signature: Date: Date: Date:			
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Business Office and Board Review/Approval:			
Business Office Review/Approval:			
Board Review/Approval: Date:			
Summary Due Date:			



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Building Name: Linn-Mar High School Sponsoring Group: Girls Baske-thail			
Contact Name: Chad Tompkins Contact Phone: (319) 730 -1632			
Contact Email: Champkins linnmar. kl2. Ye. us District Account Code: 21.0109.1900.920. Le SII			
Description of Fundraising Activity (All information is required for the request to be considered)			
Fundraising Activity: Youth comps			
Activity Start/End Dates: Tone 2026 Estimated Proceeds: 54,000			
Purpose/Use of Funds Raised (Must be specific): Proceeds will be used to pay for			
an extre ceaching contract along with payment for the			
program's use of Hudi for the 25-26 season			
Administrator Approval:			
I approve that this request is necessary to provide funds for the purposes described above.			
Building Administrator's Signature: Date: Date:			
DESCRIPTION IN IN PROPERTY IN INSTRUCTION IN INSTRU			
Business Office and Board Review/Approval:			
Business Office Review/Approval:			
Board Review/Approval: Date:			
Summary Due Date:			

Revised: 6/22; 7/22



5/28/25

Fundraising Request Form

Exhibit 805.5

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REMINDERS: All groups are required to submit a request for each fundraiser to the Business Office specifying how all funds raised will be spent. A Fundraising Project Summary (Refer to Policy 1005.4-E2) is due six weeks after the fundraiser ends. Proceeds should be spent during the year funds are raised.

Building Name: Maian Well Element Sponsoring Group: 44. Dept

Contact Name: <u>UGAM. Hamicul</u> Contact Phone: <u>(319) 447.3295</u> Contact Email: <u>Madiculus</u> innwar, <u>KI2</u> ia.VS District Account Code: <u>10.0418.1013.101</u> . 8039.001999 Description of Fundraising Activity (All information is required for the request to be considered)
Description of Fundraising Activity (All information is required for the request to be considered)
Fundraising Activity:
Activity Start/End Dates: Ang 2025 - NN , 2025 Estimated Proceeds: \$ 800
Purpose/Use of Funds Raised (Must be specific): What to prumase add time
Supplies for and projects due to budget
Administrator Approval:
I approve that this request is necessary to provide funds for the purposes described above.
Building Administrator's Signature: Date:
Business Office and Board Review/Approval:
Business Office Review/Approval:
Board Review/Approval: Date:
Summary Due Date: Revised: 6/22; 7/22





5/28/25

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Building Name: Indian Week Elementary Sponsoring Group: At Dept

Contact Name: 164 M. Havicet Contact Phone: (319) 447.3295
Contact Email: Marticula linnmar. K12.1a. US District Account Code: 10.0418.1013.101.
8039.001999
Description of Fundraising Activity (All information is required for the request to be considered)
Fundraising Activity: AABOWA
Activity Start/End Dates Oct 1025 - May 2026 Estimated Proceeds: \$400-\$600
Purpose/Use of Funds Raised (Must be specific): 150 purpose add fona
Supplies for and projects due to budget
MANAGERIE II O RECORDER IS O RECORDER II II DEPOSITION II II DESCRIPTION II II II DESCRIPTION II
Administrator Approval:
I approve that this request is necessary to provide funds for the purposes described above.
Building Administrator's Signature:
Business Office and Board Review/Approval:
Business Office Review/Approval:
Board Review/Approval: Date:
Summary Due Date: Revised: 6/22: 7/22