

Sponsoring Group	Activity	Contact	Start Date	End Date	Est. Profit	Purpose of Funds
Wrestling - Boys	Donnybrook Tourney	Doug Streicher	Dec-25	25-Dec	\$2,000.00	coaching clinic, awards, warmups
	LMWC Tourney	Doug Streicher	Jan-26	Jan-26	\$7,000.00	coaching clinic, charter buses, equipment
	Dev. Tourney	Doug Streicher	25-Dec	25-Dec	\$1,200.00	recognition, equipment, repairs
Cross Country - Girls	Team Poster	Emily Burmeister	Aug-25	Sep-25	\$2,000.00	meet supplies, warmups, uniforms
Swim/Dive	Hosting IA State Master Meet	Tom Belin	3/28/2026	3/28/2026	\$3,500.00	equipment, consultants
Robotics	Summer Camps	Dan Niemitalo	7/7/2025	7/18/2025	\$12,000.00	competition fees, parts/materials, expenses



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Fundraising Request Form

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
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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: HS. Sponsoring Group: Men's Wrestling
Contact Name: Doug Streicher Contact Phone: x 3052
Contact Email: dstreicher@linn-mar.k12.ia.us District Account Code: 6791

Description of Fundraising Activity (All information is required for the request to be considered)
Fundraising Activity: Dan Gable Donnybrook Host
Activity Start/End Dates: Dec 2025 Estimated Proceeds: \$2,000
Purpose/Use of Funds Raised (Must be specific): coaching clinic, awards,
state recognition shirts, middle school warm-up shirts
charter buses, equipment & repair

Administrator Approval:
I approve that this request is necessary to provide funds for the purposes described above.
Building Administrator's Signature: [Signature] Date: 4/4/25

Business Office and Board Review/Approval:
Business Office Review/Approval: [Signature] Date: 4/22/25
Board Review/Approval: _____ Date: _____

Summary Due Date: _____

Revised: 6/22; 7/22



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Building Name: HS Sponsoring Group: Men's Wrestling

Contact Name: Doug Streicher Contact Phone: x 3052

Contact Email: dstreicher@linnmar.k12.ia.us District Account Code: 6791

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

Fundraising Activity: LMWE Tourney TOURNEY

Activity Start/End Dates: Jan. 2026 Estimated Proceeds: \$7,000

Purpose/Use of Funds Raised (Must be specific): coaching clinic awards
state recognition shirts middle school warming shirt
charter buses, equipment & repair

Administrator Approval:

I approve that this request is necessary to provide funds for the purposes described above.

Building Administrator's Signature: [Signature] Date: 4/14/25

Business Office and Board Review/Approval:

Business Office Review/Approval: [Signature] Date: 4/22/25

Board Review/Approval: _____ Date: _____

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Building Name: HS Sponsoring Group: Men's Wrestling
Contact Name: Doug Streicher Contact Phone: X 3052
Contact Email: dstreicher@lincoln.k12.or.us District Account Code: 6791

Description of Fundraising Activity (All information is required for the request to be considered)
Fundraising Activity: LMWC Dev. Tourney
Activity Start/End Dates: Dec. 2025 Estimated Proceeds: \$1,200
Purpose/Use of Funds Raised (Must be specific): Coaching clinic, awards
state recognition shirts, middle school 'warm-up' shirts
charter buses, equipment & repair

Administrator Approval:

I approve that this request is necessary to provide funds for the purposes described above.

Building Administrator's Signature: Cf Date: 4/4/25

Business Office and Board Review/Approval:

Business Office Review/Approval: C. H. Housh Date: 4/22/25

Board Review/Approval: _____ Date: _____

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Revised: 6/22; 7/22



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Building Name: High School Sponsoring Group: Linn-Mar Girls Cross Country
Contact Name: Emily Burmeister Contact Phone: (319) 400-2422
Contact Email: eburmeister@linnmar.k12.ia.us District Account Code: 21-0109-1900-920-6846

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

Fundraising Activity: Girls Cross Country Poster Donations

Activity Start/End Dates: August 2025-September 2025 Estimated Proceeds: \$2,000

Purpose/Use of Funds Raised (Must be specific): We utilize poster donations to purchase meet supplies (tarp, water coolers, tent, etc.), as well as to help cover the cost of warmups and uniforms.

Administrator Approval:

I approve that this request is necessary to provide funds for the purposes described above.

Building Administrator's Signature: [Signature] Date: 4/2/25

Business Office and Board Review/Approval:

Business Office Review/Approval: [Signature] Date: 4/2/25

Board Review/Approval: _____ Date: _____

Summary Due Date: _____

Revised: 6/22; 7/22



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Building Name: Aquatic Center Sponsoring Group: Girls Swim/Dive & Boys Swim
Contact Name: Tom Belin Contact Phone: 319-377-5614
Contact Email: thomasbelin@kataract.com District
Account Code: 21.0109.1900.920.6871

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

Hosting Iowa State Master Meet 2026 Activity

Start/End Dates: March 28, 2026 Estimated Proceeds: \$3,500

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

To purchase team equipment and consultant for both the girl and boys swim team

Administrator Approval:

I approve that this request is necessary to provide funds for the purposes described above.

Building Administrator's Signature: _____

[Signature]

Date: _____

4/1/25

Business Office and Board Review/Approval:

Business Office Review/Approval: _____

[Signature]

Date: _____

4/22/25

Board Review/Approval: _____

Date: _____

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Building Name: High School Sponsoring Group: LM Robotics
Contact Name: Dan Niemitalo Contact Phone: 319-400-2730
Contact Email: dniemitalo@linnmar.k12.ia.us District Account Code: 21.0109.1900.950.7426

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

Fundraising Activity: Summer Robotics Camps
Activity Start/End Dates: July 7-11 and July 14-18, 2025 Estimated Proceeds: \$12,000
Purpose/Use of Funds Raised (Must be specific): Fund FIRST Tech Challenge (FTC) and FIRST Robotics Competition (FRC) programs in 2025-26. Includes registration fees, robot parts, various materials, and other expenses.

Administrator Approval:

I approve that this request is necessary to provide funds for the purposes described above.

Building Administrator's Signature: Zach Mof Date: 4/10/25

Business Office and Board Review/Approval:

Business Office Review/Approval: Cristina Hunsaker Date: 4/22/25

Board Review/Approval: _____ Date: _____

Summary Due Date: _____

Revised: 6/22; 7/22