



DAVIES BOOSTER CLUB FUNDS REQUEST

Guidelines and Form (updated November 2021)

The Davies Booster Club provides financial support for as many academic, extra-curricular, and athletic requests as possible. Our goal is to distribute funds fairly and equitably to all requesting programs. Our main sources of revenue are membership and donations. Please encourage the adults associated with your request to become members and to donate their time in some way to the Booster Club so we continue to have the resources for requests such as this.

The Booster Club supplements, not replaces the District’s budgetary obligations. Positive fund request objectives include: 1) a long-term impact on students, and 2) represents non-recurring expenditures.

Request Deadline: the first Wednesday of the month (meetings are the 2nd Wed of the month)

Submit Request to BOTH:

- Lenny Ohlhauser, Davies Athletic Director, ohlhaul@fargo.k12.nd.us
- info@daviesbooster.com

Submission Guidelines:

- complete request form
- board meeting attendance recommended by at least 1 representative for requests over \$1000
- two price quotes recommended for items exceeding \$2000
- please include copy of receipt(s)—put in the Booster Club mailbox in Davies office
- please include digital photo(s) (if available) to share with the Club’s Facebook group

Requests for prior purchases are typically not approved.

Groups will be notified the week after the Board meeting on the status of their request.

ITEMS/PROGRAMS NOT TYPICALLY FUNDED:	
school capital improvements, expenditures & equipment	food and beverages
team uniforms & equipment necessary to operate the program	travel expenses
items covered under the school’s budget	end of year banquets or parties

Refer to the Booster Minutes for a history of approved requests:
<https://www.fargo.k12.nd.us/Page/1179>

Davies Booster Club Funds Request Form

Today's Date: _____ Date Needed By: _____

Individual/Group Requesting: _____

Contact: _____

Phone/Email: _____

Number of Students (Impact #): _____

Amount Requested: _____

Please describe what the funds will be used for: _____

Additional funding sources for this request (what are they, have you requested their assistance, and what is the status?):

What is the alternate option if this request is not approved? _____

Signature of the Person Making Request: _____

The portion below to be completed by the Booster Club.

Approved Denied (circle decision) Date:	
Amount approved:	
Booster Official's Signature:	
Receipt Received:	Photo Received:

The Booster Club will need a copy of the receipt after the item has been purchased. A copy of the receipt should be emailed to info@daviesbooster.com or mailed to Davies Booster Club, 7150 25th St S, Fargo, ND 58104 no later than 14 days after the funding item has been purchased.

**Email Completed
Form to both:**

Lenny Ohlhauser, Davies Athletic Director, ohlhaul@fargo.k12.nd.us
info@daviesbooster.com