

PROPOSED FUNDRAISING REQUEST FORM

Submission Date:	Fundraising Profit Category: <i>(please check one)</i>	<u>TO BE COMPLETED BY VESTRY</u>
	Small \$0 - \$999 _____ Medium \$1,000 - \$2,999 _____ Large \$3,000 + _____	On behalf of the SMEC Vestry your Proposed Fundraising Request is: Approved ____ Disapproved ____ Comments: _____ _____ Signature: _____ Date: _____
Name of Fundraiser:		
Chairs and Committees are:		
Brief Description of Fundraiser:		
Venue, Date and Time:		
Funding Source:		
Marketing Plan:		

FUNDRAISER CONTACT INFORMATION:

Chairperson _____ Contact Numbers _____

email address _____

Co- Chairperson _____ Contact Numbers _____

email address: _____

Fundraiser Request submitted by: _____ Date: _____