

Mounds View Public Schools
350 Highway 96 West
Shoreview, MN 55126

Form EG-5119B

FUND RAISING ACTIVITY

Involving Community Solicitation or Door-to-Door Selling
(To go to the parent)

Date _____

Name of organization: _____

School: _____ Advisor: _____

1. Type of program or activity planned (for which funds are being raised)

2. Purpose of program or activity _____

3. Date(s) _____

4. Total cost of program or activity _____

5. Type of fund raising activity planned _____

6. Total amount to be raised _____

7. Date(s) _____

8. Type of merchandise to be sold _____

9. Unit price of merchandise to be sold _____

Revised: 3-8-06 (address change only)