

## Central Elementary – High School PROJECT REQUEST

Name of Organization:	
Project	
Date of Request	Date of Project
If fund raising, what will the money	y be used for?
Sponsor	Principal
Approved	Date
Disapproved	Date
	ROJECT, PEASE COMPLETE THE FOLLOWING INFORMATION AND RN THE ENTIRE FORM TO THE PRINCIPAL
Item(s) to be sold	
Vendor	
Cost per unit	Total Merchandise
Sale price per unit	Admission
	Gross Profit
	Expenses
	Net Profit