

HADI SHRINERS



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www.hadishrine.org

FUND RAISING ACTIVITY APPROVAL FORM

TO: POTENTATE _____, _____ TEMPLE A.A.O.N.M.S.

RE: Seeking Approval To Conduct A Shrine Fund Raiser. We respectfully request permission to hold the following fun raising activity.

 FRATERNAL PURPOSE

The statement of purpose and disclosure published on its solicitation material, tickets, programs, and documents regarding the use of the proceeds shall read: Proceeds are for the benefit of (_____ Temple) (_____ Shrine Club) activities. Payments are not deductible as charitable contributions.

 CHARITABLE PURPOSE

The statement of purpose published on its solicitation material, tickets, programs, and documents regarding the use of the proceeds shall read: Proceeds are for the benefit of Shriners Hospitals for crippled children.

SPONSOR OF THE ACTIVITY: _____
(TEMPLE, UNIT, OR SHRINE CLUB)

TYPE OF ACTIVITY: _____

DATES OF ACTIVITY: _____

LOCATION: _____

REQUESTED BY PRESIDENT OR CHAIRMAN: _____

MAILING ADDRESS: _____

PHONE: (BUSINESS) _____ PHONE: (HOME or CELL) _____

The Completion of the Questions Follows the Shrine Fundraising Policy and Procedures as Defined in The General Order No. 1 Under the Fund-Raising Activities Section.

*** ***** CHECK LIST FOR TEMPLE USE ONLY ***** ***

REQUEST NUMBER: _____ REQUEST RECEIVED: ____/____/____

_____/____/____ Approved by Committee Date Potentate's Approval ____/____/____ Date

Financial Results Received: ____/____/____ File Closed: ____/____/____

For Charitable fund-raiser, assigned Charity Activity Event No. _____
Charitable net proceeds transmitted to Imperial Headquarters: ____/____/____