

## Fundraisers & Special Collections

### Submission for Approval

#### Purpose

This form should be completed for any event, activity, fundraiser, or program that requests funds from St. Rose and/or Good Shepherd Mission Parishioners or intends to leverage the St. Rose Philippine Duchesne or the Good Shepherd Mission name or reputation in whole or in part (including use in social media, websites, or any form of written or electronic media). This form should provide sufficient information for an independent council to review the details of the request and understand the purpose, costs, goals, resources, risks, and any other information pertinent for review and approval of the activity.

#### General Information / Contact

Person Submitting Request: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Organization: \_\_\_\_\_

Event Title / Name: \_\_\_\_\_

Purpose: \_\_\_\_\_

Beneficiary: \_\_\_\_\_

Start Date(s) / Times: \_\_\_\_\_

End Date(s) / Times: \_\_\_\_\_

Location(s): \_\_\_\_\_

Activities Contrary to Authentic Catholic Teaching:      Yes              No

Is this the 1<sup>st</sup> Time having this Event?                      Yes              No

If not, when was the prior event? \_\_\_\_\_

How much was raised? \_\_\_\_\_

### Specifics of Event

Describe the Event (attach additional sheets if needed):

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Net Income Goal: \_\_\_\_\_ Percentage (%) to Beneficiary: \_\_\_\_\_

Additional Resource Needs:

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Signature: \_\_\_\_\_ Submission Date: \_\_\_\_\_

Forms properly completed require review and approval by the Finance Council and Pastor or their designee. The Finance Council typically meets monthly.

**Remainder is for Office Use Only:**

### Pastor & Finance Council Review and Advisement:

Approved: \_\_\_\_\_

Not Approved: \_\_\_\_\_

Date: \_\_\_\_\_

Communicated to Contact: \_\_\_\_\_