

First Unitarian Universalist Church of San Antonio  
Fundraiser Request Form

Date request submitted:

---

Committee/Group:

---

Name of Contact Person:

---

Phone:

---

Email:

---

Purpose:

---

---

Reserve Account for proceeds: \_\_\_\_\_

Description of Fundraising Activity:

---

Preferred dates: \_\_\_\_\_

Location: \_\_\_\_\_

Anticipated cost: \_\_\_\_\_

Anticipated proceeds: \_\_\_\_\_

**Office Use**

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

Reason:

---

---

Signature:

---

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