

# FUND RAISING ACTIVITY APPROVAL FORM

TO: Potentate, Ben Hur Shriners A.A.O.N.M.S.

RE: Seeking approval to conduct a Shrine Fund Raiser

We respectfully request permission to hold the following fund 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 Ben Hur Shriners \_\_\_\_\_  
(Unit or Club if Applicable)  
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 Children.”**

Sponsor of Activity \_\_\_\_\_  
(Shriners, Shrine Unit or Shrine Club)

Type of activity: \_\_\_\_\_

Date(s) of activity: \_\_\_\_\_

Where held: \_\_\_\_\_

Requested by: \_\_\_\_\_  
(President or Chairman)

Mailing address: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Phone: \_\_\_\_\_  
(Business)                      (Home)                      (Cell)                      (Fax)

The completion of the above questions follows the Shrine Fund-Raising policy and Procedures as defined in the General Order No. 1 under the Fund-Raising Activities section.

## \*\*\*\*\*Check List For Office Use Only\*\*\*\*\*

Request Number: \_\_\_\_\_ Date Request Received: \_\_\_\_\_

\_\_\_\_\_  
Approved by Committee      Date: \_\_\_\_\_      Approved by Potentate      Date: \_\_\_\_\_

Financial results received Date: \_\_\_\_\_ File closed Date: \_\_\_\_\_

For a charitable fund-raiser, assigned Charity Activity Event Number: \_\_\_\_\_

Charitable net proceeds transmitted to Imperial Headquarters Date: \_\_\_\_\_