

# St. Matthew Parish Fundraiser Application

Please fill out all information thoroughly.

Your application indicates your group's understanding and agreement to adhere to the St. Matthew Parish Fundraising Policy (Community Book in Lobby).  
If you have any questions please contact the parish office at 762-4200.

## General Information

Sponsoring Group: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Contact Person(s): \_\_\_\_\_ Phone: \_\_\_\_\_

Description of Fundraiser: \_\_\_\_\_

What date(s) will your fundraiser be held? \_\_\_\_\_

If fundraiser will be held more than once, please indicate whether:

- ☐ Monthly
- ☐ Weekly
- ☐ Other (specify) \_\_\_\_\_

## Location

**(Please, no flyers are to be attached to painted walls—only authorized flyers on glass/other walls)**

Will your fundraiser or ticket sales take place: \_\_\_\_\_ Off-Site

At St. Matthew Parish? If so, check the area(s) you will use:

- ☐ Outside of main entrance
- ☐ Lobby
- ☐ Cafeteria/Kitchen
- ☐ Lawn/Fields
- ☐ Other \_\_\_\_\_

Time of building use \_\_\_\_\_

## Intended Audience

Who will be solicited by this fundraiser? Check all that apply

- ☐ St. Matthew Parishioners
- ☐ Residents of the community
- ☐ Local Businesses
- ☐ Other (specify) \_\_\_\_\_

## Financial Goals

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Fundraiser goal in dollars (for the entire year): \_\_\_\_\_

Why are the funds being raised: \_\_\_\_\_

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Are you raising funds to send to an organization outside of St. Matthew?

Name and address of organization \_\_\_\_\_  
\_\_\_\_\_

Two people from the group conducting the fundraising must be designated as: 1) a funds collector and (2) a verifier. **Two people should be present when counting money and preparing deposits.**

\_\_\_\_\_  
Name: Phone

\_\_\_\_\_  
Name: Phone

At the conclusion of the fundraising day/event, **all funds must be turned into the parish office. Funds should be counted and deposited same day (parish office or drop safe at parish: hallway behind the old sanctuary). Put money in a sealed envelop or in the bags at the drop safe Any reimbursement must include all original receipts attached and the appropriate forms filled out (Check requests or Credit Vouchers).**

This fundraising request has been approved by

\_\_\_\_\_  
Pastoral Staff Member

\_\_\_\_\_  
Date

\_\_\_\_\_  
Director of Administration & Stewardship

\_\_\_\_\_  
Date

(Final approval is only obtained from the Director of Adm.& Stewardship and a signed copy will be returned to sender upon approval/denial.) Revised Form 2/20/07.

This fundraising request has been denied for the following reasons: