

EXTRAS Valentine's Day Fundraiser

Student Name _____

Homeroom Teacher _____

**Check all
that apply**

	1 Flower for my child	From:
	2nd Flower for my child	From:

	SCS Staff and Teachers (list names below)	From:
<i>Ex: ✓</i>	<i>Mr. Shippa</i>	<i>Extras Staff</i>

_____ # of Anonymous Flowers

**This is to ensure all students and staff receive at least 1 flower.*

Total # of flowers _____ x \$2 per flower = _____

Attach and label your cash/check to this form and return no later than **Friday, February 7th.**

Checks payable to " EXTRAS " with "Fundraiser" in the memo