

KILLEEN INDEPENDENT SCHOOL DISTRICT

Food Fundraising & Vending Request Form

Food Items to be sold _____

Manufacturer’s nutritional information must be attached on each item to be sold. This information should include package size, serving size, fat, sugar grams, calories, trans fat, ingredients, and sodium information.

I. General Info.: Name of Group/Campus _____

Contact Person: Name _____

II. Activity: Phone/E-mail _____

Date/Time _____

Hours of Sales

Start time _____ End Time _____

Location for fund raising event (hallway, gym, etc.) _____

III. _____
Group Representative Signature/Date

IV. _____
Principal/Designee Signature/Date Printed name of Principal/Designee

Do not write below this line _____

V. Your fund raising activity has been approved/disapproved Date: _____

Director for School Nutrition

Principal or Requesting Group, please submit this form to:

Director of School Nutrition

Allow 10 business days for reply

5708 East Veterans Memorial Blvd, Killeen, Texas 76543, phone:336-0775/Fax (254) 680-4342