



## FUNDRAISING CONTRACT

Group Name (Please specify Mission Group, Community Organization, PTA, PTO, etc.) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Website: \_\_\_\_\_

Fundraising Chairperson: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Co-Chairperson: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

**Fundraising Goal: \$** \_\_\_\_\_

**Kick Off Date:** \_\_\_\_\_ **End Date:** \_\_\_\_\_

*Fundraisers are only available up to 4 weeks. Repeat fundraisers are acceptable.*

**\*\*Delivery Date: Week of** \_\_\_\_\_

*\*\*Order forms must be received within 3 Business Days of abovementioned delivery date to ggtreats@gmail.com or delivery date/sales funds will be delayed.*

*100% of payment is due upon delivery. Earned percentage of funds will be made available to you in 1-2 business days.*

**Agreement Terms and Conditions** It is agreed that this program will take place and that GOODNESS GRACIOUS COOKIES will purchase the products/materials necessary. If this program is canceled, the above-named group will be responsible for any costs incurred for baking supplies, order forms, marketing, samples, etc. It is further agreed that the group is entering into a fundraising contract with GOODNESS GRACIOUS COOKIES for the purpose of selling homemade baked goods in conjunction with the above-named group and for the group's own benefit. The organization further agrees to submit funds at the scheduled time in the form of cash, money order or cashier's checks. Electronic funds must be paid in advanced via Paypal or Square and only those funds that have cleared will be processed. No eCheck still pending will be processed. Personal checks will not be accepted. NOTE: PTA's, PTO's, etc., are classified as consumers under Tenn. Code Ann. 67-6-102 (8) (B) and Tenn. Comp. R. & Regs. 1320-5-1-09 and 1320-5-1-51(2) of Tennessee Sales and Use Tax Law. GOODNESS GRACIOUS COOKIES will collect any applicable sales tax on the sale to the organization. Based on adjusted retail (retail cost minus sales tax). Tennessee schools only.

### This area for Goodness Gracious Cookies Rep Use Only:

Make checks payable to: \_\_\_\_\_ Date: \_\_\_\_\_  
Fundraising Organization Name/Fundraising Chairperson

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
Fundraising Chairperson Organization Founder/Leader

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
GGC Representative