

FUNDRAISER/SALES PROJECT FORM FOR STUDENT ACTIVITY

"SIDE A"

Office use only
Bd Mtg Date: _____

ORGANIZATION NAME: _____

CONTACT PERSON: _____ PHONE: _____

CONTACT PERSON ADDRESS: _____

PROPOSED FUNDRAISER: _____

COST PER ITEM? \$ _____ PROPOSED SALE PRICE? \$ _____ ESTIMATED # ORDERED: _____

FUNDRAISER BEGINNING DATE: _____

FUNDRAISER COMPLETION DATE: _____

LOCATION OF FUNDRAISER: _____

(FYI: IF THE FUNRAISER IS ON SCHOOL PROPERTY, A BUILDING USE FORM MUST ALSO BE COMPLETED.)

ADMISSION OR ENTRY FEE: _____

WILL STUDENTS BE PARTICIPATING IN THE ACTIVITY? YES _____ NO _____

ANY PROFIT GENERATED FROM THIS FUNDRAISER WILL BE USED FOR THE FOLLOWING:

Signed: _____ Date: _____

Building Principal Signature: _____ Date: _____

Superintendent's Signature: _____ Date: _____

Please fill out the front of this form (SIDE A) in its entirety and submit for approval. After the Superintendent's signs it, we will keep a copy of this to be approved at the next Board meeting (if necessary) and send the original back to you. **Upon completion of the fund raiser, you must complete the back side of this form (SIDE B) and return for final signatures.** The form will then be filed in the Central Office for review by the auditors at year end.
Any questions, please call Susie at 448-4930.

"SIDE B"

SCHOOL YEAR _____

ONCE FUNDRAISER IS OVER, PLEASE COMPLETE "SIDE B", SIGN AND RETURN TO CENTRAL OFFICE:

ACTUAL QTY ORDERED	DESCRIPTION OF ITEM	Cost Paid Per Item	Sale Price of Item
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$

(If same as "estimated" on Side A, indicate same.)

SALES PROJECT BREAKDOWN

RECEIPTS: (Actual deposits from project or fundraiser)

<u>Date</u>	<u>Amount</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
<u>Total Project Deposits:</u>	
	\$ _____

EXPENSES: (Actual expense of project or fundraiser)

<u>Date</u>	<u>Purchased From</u>	<u>Amount</u>
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
<u>Total Project Expense:</u>		\$ _____
<u>TOTAL PROFIT:</u>		\$ _____

Reason(s) for any discrepancies:

Advisor/Sponsor Date

Building Principal Date

Superintendent Date