|  |
| --- |
| **Fundraising Form (Page 1)** |

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Requested by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **De**scription of Project: |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

How will funds be used?

|  |
| --- |
|  |
|  |
|  |
|  |

***Is this a raffle?*** \_\_\_\_Yes \_\_\_No If yes, please enter raffle license number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

All funds raised on behalf of student organization must be deposited in on campus account

After the fundraising activity is complete, please complete the budget worksheet on page two (2) of this form to account for funds raised and deposited into your student account.

Office of Clubs and Organizations Approval Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name of Approver\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Fundraising Form (Page 2)**

A copy of this worksheet and the original receipt (s) for funds deposited in the student account must be turned in to the student organization office by the end of the next work day after the event.

A. Number of advance admissions sold: \_\_\_\_ x price of admissions = $\_\_\_\_\_\_\_\_\_\_

Number of admissions sold at door: \_\_\_\_ x price of admissions = $\_\_\_\_\_\_\_\_\_\_

Total income from admissions: $\_\_\_\_\_\_\_\_\_\_

B. Income from sale of refreshments, souvenirs, other commodities:

Prior to event $\_\_\_\_\_\_\_\_\_\_\_

During event $\_\_\_\_\_\_\_\_\_\_\_

Total income from sales $\_\_\_\_\_\_\_\_\_\_\_

C. Donations received:

Cash total $\_\_\_\_\_\_\_\_\_\_\_\_

D. Total Income $\_\_\_\_\_\_\_\_\_\_\_\_

Summary

A. Total Income for Event $\_\_\_\_\_\_\_\_\_\_\_

B. Total Expenditures paid to date $\_\_\_\_\_\_\_\_\_\_\_

C. Total Amount deposited next work day $\_\_\_\_\_\_\_\_\_\_\_ -or next work day after report submitted

We, the undersigned, hereby certify that the figures stated in this accounting are true and correct.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization President Date Organization Advisor Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Treasurer Date