



Activity Funds
Fundraising Activity Form

SECTION 1 – GENERAL INFORMATION			
Campus Name	Today's Date	Account Number	Name of Activity Fund Club or Organization
Sponsor/Contact Name		Sponsor/Contact Phone #	Sponsor/Contact Email

SECTION 2 – FUNDRAISER INFORMATION				
Fundraiser # (Assigned by Financial Services)	Type of Fundraiser		Date(s) fundraiser/event will take place	
			From: _____	To: _____
Vendor Name	Is this a taxable sale? Yes No	If yes, is this one of your two tax-free days for the year?	Tax Free Day (if applicable)	Will distribution to students occur during school hours? Yes No (time) _____
What type of merchandise/service will be sold/provided and how?				
What will the funds generated be used for? Be specific.				

SECTION 3 – PROJECTED SALES & EXPENDITURES	
(a) Price per item/service to be sold _____ (b) Number of items/services expected to be sold _____ (c) Expected income _____ (d) Total cost of merchandise/services _____ (e) Expected Profit _____	Enter additional information here or attach price list (e.g., commission, price range).

SECTION 4 – ACKNOWLEDGEMENT & REQUIRED SIGNATURES			
<i>I certify that I will exercise strict control over all products in my possession and will remit all collections on a daily basis to the campus secretary/bookkeeper. I further certify that I have reviewed and read the Activity Funds Manual on the District's website and signed the Acknowledgement of Responsibilities for Sponsors form. Additionally, I certify I have received the Sponsor's training and will notify Financial Services if additional training is needed. I understand that I am responsible for any losses due to my failure to follow established rules and procedures. Acknowledge by signing below (If signing manually, please date it).</i>			
Sponsor's Signature	Reviewed by Bookkeeper	Principal's Approval	Financial Services Approval
Date: _____	Date: _____	Date: _____	Date: _____

SECTION 5 – FUNDRAISER RECAP (To be completed at the END of the fundraiser)		
REVENUES	EXPENSES	INVENTORY RECAP (Product Sales Only)
(a) Total Sales/Collections _____	(g) Payments to Vendor _____	(k) Total items available for sale _____
(b) Commissions Received _____	(h) Sales Tax _____	(l) Actual items sold _____
(c) Donations Received _____	(i) Other* _____	(m) Items returned* _____
(d) Total Funds Raised _____	(j) Total Expenses _____	(n) Items unaccounted for* _____
(e) Total Bank Deposits _____	PROFIT/LOSS	(o) Items remaining in inventory _____
(f) Difference* _____		
* Comments/explanations of discrepancies		
* How will you dispose of remaining inventory?		

SECTION 6 – ACKNOWLEDGEMENT & REQUIRED SIGNATURES		
By signing below, I certify that the information included in this Fundraiser Recap is accurate.		
Completed by Sponsor	Verified by Bookkeeper	Principal's Approval

Email the completed form to Financial Services within 10 days of the end of the fundraiser.