

TROY HIGH SCHOOL ASB REVENUE POTENTIAL / FUNDRAISER RECAP

FILL OUT THIS PORTION *PRIOR* TO YOUR FUNDRAISER AND RETURN TO MRS. WILLIAMS AT THE ACTIVITIES DESK

Name of Club or Group: _____ Account Number: _____

Date(s) of Fundraiser: _____ Date approved: _____

What are you raising money for?: _____

What are you selling for the fundraiser?: _____

How many items do you intend to purchase?: _____

What is the cost of each item?: \$ _____

How much will you charge for each item?: \$ _____

If you sell all of your items, how much money will you take in? (profit): \$ _____

(IMPORTANT NOTE: Mrs. Williams will return this form to you in your cash box on the day of your fundraiser to complete the next section.)

FILL OUT THIS PORTION *AFTER* YOUR FUNDRAISER AND RETURN TO MRS. WILLIAMS AT THE ACTIVITIES DESK

Total number of items for sale at start of sale: _____ At end of sale: _____

Price of each item: _____

Total amount of money for deposit from the sale (minus "start" money): \$ _____ (A)

Total cost to purchase items (include tax, shipping, etc.): \$ _____ (B)

Gross profit ("A" minus "B"): \$ _____ (C)

List any other (not including "B") expenses for your fundraiser (supplies, custodian charges, etc.)

\$ _____ (D)

Gross profit: \$ _____ (C)

Minus other exp.: \$ _____ (D)

Net profit: \$ _____

Explain any irregularities with your fundraiser below such as items damaged, lost, etc. or attach an explanation:

(IMPORTANT NOTE:) Place this form in the provided cash box after your fundraiser *along with the provided deposit slip*. The cash box should be returned to Mrs. Williams by your advisor so that the money earned can be deposited into your club account.)