

Beaufort County Schools
Request for Fund Raising Project

(Prepare in Triplicate – Copies to Sponsor, Principal and Bookkeeper)

Club/Fund: _____ Date: _____

Sponsor: _____

Project: _____

Vendor: _____

Dates of Activity: _____ From _____ To _____

Expected Profit Percentage: _____

Estimated Profits (Total): _____

Proceeds to be used for: _____

Unsold items returned to vendor for credit **Yes** _____ **No** _____ **N/A** _____

It is understood that:

Sponsor is responsible for turning in DAILY deposits of all receipts and deposits to the school bookkeeper. Money collected during and after school hours must be receipted and placed in the bank security night depository. See bookkeeper for night deposit key and night deposit bag.

The club will turn in collections sufficient to cover complete costs of the activity. Any extension of completion date must be approved in writing in advance by the principal.

Requested by: _____
(Title)

Approved: _____
(Principal)

Approved: _____
(Board of Education)

Date: _____

Date: _____

Account #: _____

Daily Receipt of Funds

Fundraiser Name _____

<u>Date Collected</u>	<u>Amount Collected</u>	<u>Teacher Receipt #</u>	<u>Office Receipt #</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Amount Collected for Fundraiser: \$ _____

Instructions:

This summary is to be filled out each time money is collected. A receipt should be written by the teacher using the name of the buyer as payee, and referencing the fundraiser name in the description. Money and receipt is to be given to the treasurer before the end of the day in which the money was collected.

Record the date collected, the amount collected, the receipt number you use and the receipt number that the office gives you. This must be done each time collections are made. At the end of the fundraiser, fill out the Fund Raiser Activity Summary Report and give it to your treasurer with this form. Total receipts should equal total sales on the Fund Raiser Activity Summary Report.

**BEAUFORT COUNTY SCHOOLS
FUND RAISER ACTIVITY SUMMARY REPORT**

****To be Turned in to School Bookkeeper at the End of the Fund Raiser****

School: _____

Activity: _____

Dates of Activity _____ thru _____

Date Activity was approved by Principal _____

Responsible Employee (Type/Print) _____

Responsible Employee (Signature) _____

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Summary of Results:

Total Revenue (Sales) Collected and Turned In	\$ _____
(Less) Cost of Freight on Returned Goods	\$ _____
(Less) Total Payments Paid or Due Vendor	\$ _____

TOTAL PROFIT (LOSS) REALIZED FROM FUND RAISER \$ _____

Vendor Name _____

PO #'s associated with vendor _____

Uncollected Funds

Are there any funds outstanding (uncollected)? _____ Yes _____ No
If Yes, attach a listing of the names, addresses, and amounts owed for each person.

If Yes, total amount outstanding (uncollected): \$ _____

If Yes, what steps are you taking to collect? _____

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Principal Review and Approval:

All documents related to this fund raiser have been reviewed and, to the best of my ability, found to be a complete and accurate accounting of the fund raising activity.

Principal _____

Date _____