



Fundraising Profit and Loss Statement

SCHOOL NAME: _____
 SPONSORING GROUP/CLUB NAME: _____ ACCOUNT #: _____
 DISTRICT ASSIGNED ACTIVITY ID#: _____ DATE OF ACTIVITY: _____

SUMMARY OF RECEIPTS	
PAGE #:	PAGE TOTAL AMOUNT
	TOTAL RECEIPTS (A)

SUMMARY OF DISBURSEMENTS	
PAGE #:	PAGE TOTAL AMOUNT
	TOTAL DISBURSEMENTS (B)

NET PROFIT OR (LOSS)	(A-B)
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BY SIGNING THIS DOCUMENT, I ACKNOWLEDGE THAT I HAVE READ, UNDERSTAND, AND AGREE TO COMPLY WITH THE POLICY AND ALL PROCEDURES APPLICABLE TO FUNDRAISING ACTIVITIES.

PREPARED BY: _____ DATE: _____
 ACTIVITY/FUNDRAISING SPONSOR

REVIEWED BY: _____ DATE: _____
 BOOKKEEPER

APPROVED BY: _____ DATE: _____
 PRINCIPAL

APPROVED BY: _____ DATE: _____
 ASSISTANT SUPERINTENDENT

FINAL APPROVAL: _____ DATE: _____
 CASH MANAGEMENT