

Fundraising Recap Form Instructions

1. Within seven business days of the completion of the fundraiser, the Fundraising Recap Form must be completed by the fundraising Sponsor. The Sponsor needs to be the person to fill out this fundraising recap form, not merely a signer of the form. The form needs to be completed in its entirety.
2. The fundraising ID# that was provided on the Fundraising Permission Request Form needs to be the same # indicated at the top of this form.
3. Every receipt that the Sponsor received from the campus secretary/bookkeeper needs to be listed individually. There are fifteen lines provided. If additional lines are needed, you may attach an additional sheet as necessary.
4. The grand total of deposits must match the sum of all itemized deposits.
5. List the actual amount of all expenditures for this fundraiser. The PO #s used for this fundraiser needs to be indicated on the form and copies of all invoices/receipts needs to be attached to this fundraiser for auditing purposes.
6. The Sponsor then needs to submit the form to the campus secretary/bookkeeper who will verify the accuracy of the data and complete the cash receipt portion of the form. Any discrepancies between what the Sponsor indicated and the campus secretary/bookkeeper that cannot be resolved, needs to be addressed and annotated on the form.
7. The Sponsor, campus secretary/bookkeeper, and principal need to sign the Recap Form prior to submission to the Business Services Department for processing.
8. Once the form has been audited and processed by the Business & Financial Services Department, your budget accounts accordingly.

Submit only one recap form per fundraiser. Due **seven business days after the completion of the fundraiser.**

Date:

Sponsor:

Campus:

Club:

Fundraising Activity:

Last Date of Fundraising Activity:

Summary of all deposits for this fundraiser:

Date	Sponsor Receipt # or range of #'s	Secretary / Bookkeeper receipt # (if Cash Receipt wasn't issued)	TEAMS Cash Receipt #	Amount
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$

Grand Total of Deposits:

Less: Total Expenditures for Supplies/Items for Resale**

Less: Amount Previously Requested as an Advance (from Permission Request Form):

* attach all invoices/vendor receipts to this Recap

List all PO#s associated w/ purchases for this fundraiser. PO#s:

Net Profit for this Fundraiser:

By signing below, you are stating that you are in agreement that this fundraiser was held according to District procedures and that all funds collected have been deposited and reflected in the above recap.

Sponsor's Signature:

Sec./Bookkeeper's Signature:

Principal's Signature:

Budget Specialist's Signature:

Date:

Date:

Date:

Date: