Community Independent School District
Student Activity Account
Fundraiser Financial Recap

School: _____ Club: _____

Fund Raiser Title: _____

Actual Sales:

Receipt No.	**Amount Deposited**
_____	$_____
_____	$_____
_____	$_____
_____	$_____

Actual Sales (Amount Deposited) $_____

Actual Expenses:

Invoice Number	**Invoice Amount**
_____	$_____
_____	$_____
_____	$_____
_____	$_____

Total Expenses $_____

Net Profit/Loss (Total Sales less Total Expenses) **$_____**

Club Treasurer: _____ Date: _____

Sponsor: _____ Date: _____

Principal: _____ Date: _____