



FUND RAISING COMPLETION FORM

District Code: 511.3
 Adopted Date: 4/8/1980
 Revised Date: 9/21/23

When the fundraising activity has been completed, please fill out the following form and return it to the office of the Assistant Superintendent of Business and Administrative Services.

School Year		Date	
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School			
Name of the organization:			
Name of Advisor:			
Title of the fundraiser			
Dates of the fundraiser:			
Gross Amount			
Gross Amount		Expenses	
Sales Tax		Total Profit	

*The funds collected must be deposited in a special activity account. Please contact the Business Office with any questions.

*This form must be completed to comply with accounting procedures.