



Hamilton County Board of Education

Project no. _____
(Example 2010-1)

FUNDRAISING SUMMARY REPORT

Revised 4/15/10

School Name _____

Ending Date of Fundraiser _____

Sponsoring Group _____

Part A: Resale Activity

Resale Activity _____

Total Sales \$ _____

Less: Cost of Items Sold \$ _____

*Total Fundraiser Profit \$ _____

*If difference is negative, please provide explanation for the loss on the fundraiser.

Part B: Restricted Use of Profits (complete only if fundraiser was restricted)

Restricted Purpose _____

Total Sales \$ _____

Less: Cost of Items Sold \$ _____

*Total Fundraiser Profit \$ _____

Less: Purchases made with Profit \$ _____

*Difference \$ _____

*If the difference is more than zero, please provide explanation of intended disposition of balance. (The disposition of excess proceeds or a change in authorized purpose must be approved by the Superintendent).

*If difference is negative, please provide explanation for the loss on the fundraiser.

Completed by _____ Date _____

Sponsor

Approved by _____ Date _____

Principal

NOTE: Send a copy of completed form to Sandra DeLaune, Finance Department. Retain the original for school records.