

West Valley School District # 208 ASB

On ASB Fundraiser Calendar

- ASB Club/Athletics
- ASB Charitable
- General Fund
- Booster Group (only complete this side)

Fundraiser Request Approval/Recap Report

School: _____ Group Name: _____

If a school group:
ASB Account # _____
Date of Minutes when approved: _____

Contact to email approval or Qs:

If a not school employee, provide contact.
If school employee, name is enough.

ASB Bookkeeper:
FY: _____ Item # _____

FUNDRAISER INFORMATION:

- Collecting a fee or payment
- Selling an item(s)
- Asking for donations
- Selling sponsorships

Details:

Include price/fee
Item(s) described and "options" if any
List info the office needs to process the \$\$

CHECK HERE IF YOU WANT
ITEM(S) IN THE ONLINE STORE
(not available for Booster groups)

List companies involved in this Fundraiser – indicate if you have completed a PO Request or if the items are donated, in inventory already, etc.

Intended Use of Proceeds: _____

PRE-APPROVAL

Estimated Revenue: \$ _____

Estimated Expenses: \$ _____

Estimated Profit: \$ _____

Dates for Fundraiser:

Used for Fndrsr Calendar,
be specific, please!

Other Fundraiser Details: **IN-OUT? Y or N**

Club Leader: (student) _____
Signature/Date

*Team/Club Advisor: (Staff) _____
Signature/Date

Leadership: (Student) _____
Signature/Date

ASB Director: _____
Signature/Date

Bookkeeper (Staff): _____
Signature/Date

Principal: _____
Pre-Approval Signature/Date

**AFTER COMPLETING THE FNDRSR,
FILL OUT THE REVERSE SIDE,
please.**

RECAP OF FUNDRAISER

ACCOUNTING SUMMARY OF FUNDRAISER: *complete at conclusion of fundraiser*
(not required for BOOSTER Groups)

Total Actual Revenue: \$ _____ Total Expenses: \$ _____

Net Profit or Loss: \$ _____ Extra Product? Where is it locked up? Inventory: _____

Explanation of any variance: _____

Checklist for fundraiser documentation: *(include all relevant information in the folder)*

- | | |
|--|----------------------------------|
| 1. Completed Approval/Recap Report | 9. Parental Permission |
| 2. Master Inventory List | 10. School PO Request form |
| 3. Tally Sheets or Check Out Sheet(s) | 11. Approved Purchase Order Copy |
| 4. Transmittal Form/Deposit Comp | |
| 5. InTouch Revenue Summary by Accounts | |
| 6. Copies of Itemized Invoices | |
| 7. Copy of approved ASB minutes | |
| 8. <i>Any information</i> that pertains to the Fundraiser! | |

Who did you send THANK YOU messages to?

Where are the notes about this fundraiser so next year's group can learn from your experience?

Evaluation completed by: _____

Project Chariperson(s): _____

FINAL APPROVAL

FINAL APPROVAL OF RECONCILIATION:

I hereby certify the above accounting information is complete and accurate.

Club/Team Student: _____ ASB Treasurer: _____
Signature/Date Signature/Date

Club/Team Advisor: _____ ASB Advisor: _____
Signature/Date Signature/Date