RICHARDTON-TAYLOR SCHOOL DISTRICT
FUNDRAISING REPORT

FUNDRAISER:_____

ADVISOR:_____

GROUP/CLASS:_____

ADMINISTRATIVE APPROVAL:_____ **DATE:**_____

STUDENT PARTICIPANTS

NAME	# ITEMS SOLD	AMT. COLLECTED	AMT. DUE	AMT. TURNED IN
TOTAL COLLECTED				

*Student Collected Amt & Amt. Turned in should be equal

AMOUNT TURNED INTO OFFICE: _____ **RECEIPT #**_____

TOTAL $ OUTSTANDING: + _____

TOTAL FUNDRAISING GROSS: = _____
***Equals Total Amt. Due**

TOTAL DUE TO VENDOR: - _____

TOTAL NET PROFIT TO GROUP: = _____

ADVISOR SIGNATURE:_____