



Fund Raising Activity Summary Report

Name of Event _____ School _____

Person Responsible: _____ Date of Activity: _____

*Total Gross Sales (Total money taken in): _____

Ck # Date

Less Sales Tax: _____

Net Sales: \$ -

Deposits:

<u>Prepared by</u>	<u>Date</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Deposits \$ -

Difference (Explain Variance below): \$ -

General Ledger Account Number (Internal Groups Only) _____

Expense Detail				
Date	Vendor	Description	Cost	Total Expenses
	State of Michigan	Sales Tax		
				\$ -

Explain any vendor bonus program (cash back for volume sales, free products, etc.):

Prepared by _____ Date _____

Verified by _____ Date _____