Form 520-2

SCHOOL-BASED FUNDRAISING ACTIVITY REPORT

SCHOOL: _____

NAME OF ORGANIZATION: _____

DESCRIPTION OF EVENT: _____

SUM RAISED BY THE EVENT:

(1) **Gross Revenue:**

Sales: _____

Sales: _____

Donations: _____

Other: _____

Total Revenue: $_____

(2) **Expenditures:**

Supplier	Item	Amount
_____	_____	$_____
_____	_____	$_____
_____	_____	$_____
_____	_____	$_____
_____	_____	$_____
_____	_____	$_____

Total Expenditures $_____

(3) **Net Profit**

Equals Revenue less Expenditures: $_____

(4) Surplus funds (if any) to be allocated to: _____

Reviewed by: _____ Date: _____
Principal/Designate's Signature