EDNA INDEPENDENT SCHOOL DISTRICT
Fundraising Operations Report

Organization/Club/Activity Account _____

Name of Sponsor _____

Fundraiser Start Date _____ Fundraiser End Date _____

Items Sold: Vendor/Source:_____

Total Collections from Fundraiser:

DATE	DESCRIPTION	AMOUNT

TOTAL COLLECTIONS: $_____

Total Disbursements:

DATE	INVOICE #	VENDOR	AMOUNT

TOTAL DISBURSEMENTS: $_____

Profit:
   Total Collections Minus Total Disbursements $_____

_____   _____
Sponsor/Person Responsible for Fundraiser   Date

*This report must be filed within 2 weeks of conclusion of fundraiser. It must be filed with the Secretary of record (office secretary).

*Auditor will review Operations Report.

Fundraiser Audit Detail
Fundraiser Sales

Total # of Item   Sales price of Item   Total Collected for Item_____

_____

_____

_____

_____

_____

Total Collections: $_____
*The above amount should equal all deposits

Invoice Totals

Total # of Item   Cost per Item   Total Cost for Item_____

_____

_____

_____

_____

_____

Total Invoice: $ _____
*Should match invoice. Invoice can be attached instead. If invoice
is attached pull total and enter in live above.

Profit $ _____
*Subtract invoice form deposits. Profit should directly tie back to
increase in activity fund.

The items totals on the collections must match the item totals on invoice. If item totals do not match due
to extra items ordered list below and explain for additional items ordered.

Total # of Item   Cost per Items   Total Cost for Item   Reason for additional items

_____

_____

_____

Total cost of Additional Items $_____

Additional pages can be added if needed.