

LEE COUNTY SCHOOLS
SUMMARY OF EXTERNAL FUND RAISING ACTIVITY
(PTO/PTA, Booster Clubs, Adult Organizations)

10/20/11

School: _____

Activity: _____

Dates of Activity: _____ thru _____

Date Activity was approved by Principal: _____

Responsible Employee (Type/Print): _____

Responsible Employee (Signature): _____

Total Revenue (Sales) Collected and Turned In:	\$ _____
(Less) Cost of Freight on Returned Goods:	\$ _____
(Less) Total Payments Paid or Due Vendor	\$ _____

TOTAL PROFIT (LOSS) REALIZED FROM FUND RAISER \$ _____

Vendor Name: _____

PO #'s associated with vendor: _____

Uncollected Funds

Are there any funds outstanding (uncollected)? Yes _____ No _____

If Yes, attach a listing of the names, addresses, and amounts owed for each person.

If Yes, total amount outstanding (uncollected): \$ _____

If Yes, what steps are you taking to collect? _____

Principal Review and Approval:

All documents related to this fund raiser have been reviewed and, to the best of my ability, found to be a complete and accurate accounting of the fund raising activity.

Principal

Date