ASB FUNDRAISING CHECKLIST

☐ Pre-approval of fundraising form back from ASB
☐ Parental Permission Forms (if applicable)
☐ Requisitions submitted
☐ Copy of Contract (if applicable)
☐ Beginning Inventory Count
☐ Inventory Check-Sheets
☐ Sales History (tally sheet, list or cash register reports)
☐ Ending Inventory Count
☐ List of unsold merchandise
☐ List of fines (if applicable)
☐ Documentation of unsold/returned product
☐ Final reconciliation of fundraiser
ASB Fundraising Approval Form

☐ ASB CLUB/SPORT
☐ GENERAL FUND
☐ ASB CHARITABLE

A. Proposal of Fundraiser: __________________________ Date: __________________________

**Pre-approval of fundraiser must be done 2 weeks prior to event.**

Group Name: __________________________ Contact Name: __________________________

Proposed fundraising activity:

________________________________________________________________________

Intended Use of Funds:

________________________________________________________________________

Estimated Revenue: $______________ Estimated Expense: $______________

Estimated Revenue - Estimated Expense = Estimated Profit: $______________

Will the fundraiser be held for the benefit of an organization outside of our District?
☐ No. ☐ Yes. Please include name of organization.

Date of fundraiser: Start: ___________ End: ___________

Club/Team Representative: __________________________ ASB Advisor: __________________________

Club/Team Coach: ____________________________ Principal: __________________________

ASB Representative: __________________________ Club/AD: __________________________

B. Steps following Approval.

1. Order materials needed with approved purchase order.
2. Complete facility use form. (if needed)
3. Request cash box from CHS/CMS Main Office. (if needed)
4. During fundraising; monitor all cash and goods, make accurate deposits and inventory should be kept.
5. Obtain appropriate record keeping of funds received.
6. Turn in all money into CHS/CMS Main Office with appropriate deposit sheet.

**Accounting summary of fundraiser and final reconciliation on back page.**

Based upon Policies and Procedures 3510/3510P, 3530/3530P and 4120/4120P this form was developed to improve communication, mapping of fund raising activities, and ensure that our community understands and supports established and future program needs of our students and programs.
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C. Accounting summary of fundraiser.

1. Anticipated Revenue: $____________________________
   (amount that should have been collected based on actual sales)

2. Total Actual Revenue received: $____________________________

3. Total cost of goods sold: (your cost for items sold) $____________________________

4. Other expenses: (decorations, supplies, etc.) $____________________________

5. Total Expenditures: $____________________________, Line 3 + Line 4


7. Final amount deposited/transferred into club/sport account. $_____________________

D. Final reconciliation

I certify that the above accounting information is complete and accurate.

Date: _________________________________

Club/team representative: _________________________________ ASB Advisor: _________________________________

Student signature                                      Adult Signature

Club/team Coach: _________________________________ Principal: _________________________________

Adult signature                                       Adult Signature

ASB representative: _________________________________ Club/AD: _________________________________

Student signature                                      Adult Signature