Final Report for all Approved Fundraising Activity Budgets (011, 018, 200, & 300)

This should be filled out when the project is comp	leted.	Completion	Date	*			
Activity Title	Fund_	Spec	ial Cost	Center			
Activity (Revenue) Account No							
Name of Vendor(s):							
 Revenue: Total Deposited with the Treasurer Expenses: 			S	(1)			
Product Purchased Quantity		Unit Cost		Total Cost			
	_		=				
	_						
TOTAL EXPENSES: \$ (2)							
3. Less Returns to the Vendor	\$		\$	(3)			
4. Total to be Accounted for							
5. Total of unsold or unaccounted for: (Spoiled, eaten, gifts, etc.) \$(5) Explain:							
6. Total Profit or (Loss)			\$	(6)			
(Total Deposited (1) minus Total to be Accounted for (4) minus unsold/ Unaccounted for (5)							
(If there is a Loss, Please explain below)							
Send completed form to Administration Office, attention: Treasurer's Office							
Sponsor Signature/Date							
Principal/building Admin. /Date							
(Activities with ticket sales	– fill out	other side)		Page 1 of 2			

Adams County/Ohio Valley School District

2003 Update

Final Report for Approved Fundraising Activity

TICKET SALES REPORT

[m: 1 1	11 011 1			
This shoul	d be filled out when the project is co	ompleted. Comple	etion date	
Activity T	itle]	Fund Spe	cial Cost Center	
	Revenue) Account No.			
RESERVI	ED SEATS:			
	Last Number:			
minus	First Number:			
equal	First Number: Total Sales:	X \$	= \$	
ADULTS:				
	Last Number:			
minus	First Number:			
equal	First Number: Total Sales:	X \$	=\$	
STUDENT				
	Last Number:			
minus	First Number:			
equal	First Number: Total Sales:	X \$	= \$	
TOTAL O	FALL SALES (Reserved + Adults	s + Students)		(a)
	\$(-) Beginning Ch			
	or Over (a) minus (b) \$			
Sponsor's S	gnature:		Date:	
	l completed form to Administrati			

Page 2 of 2

Adopted:11/25/02

Adams County/Ohio Valley School District