

Request for Fund-Raiser Approval

For the Period ____/____/____ Through ____/____/____

SCHOOL NAME: _____

CLUB OR ORGANIZATION NAME: _____

Person In Charge Of Fundraiser: _____

Reason/Benefit of Sale Proceeds: _____

Vendor Name: _____

Address: _____

Contact: _____

Product To Be Sold: _____

Fund Raisers: **Accounting Procedures Manual for the Public Schools in the State of West Virginia
– Office of School Finance, West Virginia Department of Education**

“All school support organizations must obtain prior approval of the school principal before conducting any fund raising activity in the name of a school. Local procedures must be established to regulate all fund raising activities conducted by school organizations to ensure that they are conducted in a proper manner.

All proceeds from fund raisers conducted by a school organization must be receipted and deposited intact into one of the organizations depository accounts. Merchandise purchased for resale should be purchased by checks issued for that purpose. In addition, all purchase invoices should be retained as documentation for the disbursements.

A profit and loss statement must be prepared for each fund raising activity conducted by a school support organization that shows gross proceeds, cost of goods sold and net proceeds. See Appendix A for a sample copy of a fund raiser profit and loss statement.

In addition, certain fund raising activities are subject to the collection and remittance of consumer’s sales tax. See Section 1-38 and Appendix B for more information.

Donations to school support organizations are only tax-exempt if the organization has obtained its own tax exempt designation from the Internal Revenue Service or if the organization’s funds are maintained in the school’s account. Donors must be made aware of tax exempt status at the time the donation is received.”

Person in Charge of Fundraiser/Date Principal/Date

RCS Board of Education Approval/Date _____

FUND RAISER PROFIT/(LOSS) STATEMENT

For The Period ___/___/___ Through ___/___/___

SCHOOL NAME: _____

CLUB OR ORGANIZATION NAME: _____

PRODUCT TO BE SOLD: _____

VENDOR PURCHASED FROM: _____

VENDOR'S ADDRESS: _____

SCHOOL PO NUMBER: _____ INVOICE NUMBER: _____

INVOICE AMOUNT: \$ _____ DATE PAID: _____ CHECK NO. _____

COST PER ITEM: \$ _____

SUMMARY OF RECEIPTS AND DISBURSEMENTS

Cash Receipts:

Merchandise Sales	\$		
Donations		_____	
_____		_____	
_____		_____	
_____		_____	
TOTAL Cash Receipts			\$ _____

Cash Disbursements:

Cost of Goods/Merchandise Sold	\$		
Cost of Prizes Awarded		_____	
_____		_____	
_____		_____	
_____		_____	
TOTAL Cash Disbursements			\$ (_____)

GROSS MARGIN or BALANCE \$ _____

LESS: Sales Tax Collected (If applicable) \$ (_____)

NET PROFIT/(LOSS) ON THIS ACTIVITY \$ _____

Preparer's Signature Date

Principal's Signature Date

TEACHER'S CASH RECEIPTS REPORT

School: _____ Date: _____

Activity: _____

Name of Club or Organization (If Applicable): _____

	Student's Name	Cash	Check	Amount Collected
1				0.00
2				0.00
3				0.00
4				0.00
5				0.00
6				0.00
7				0.00
8				0.00
9				0.00
10				0.00
11				0.00
12				0.00
13				0.00
14				0.00
15				0.00
16				0.00
17				0.00
18				0.00
19				0.00
20				0.00
21				0.00
22				0.00
23				0.00
24				0.00
25				0.00
		Total Cash		0.00
		Total Checks		0.00
		Total Collected		0.00

I hereby certify that this is an accurate and complete record of all transactions for the activity noted above.

Teacher's Signature Date

Office Personnel's Signature 45 Date

Receipt #