Student Body Fund-Raising Status – Report to Governing Board and/or Designee

(Name of School)

(Name of Club)

Student Body Fund-Raising Schedule

Fiscal Year:_____

Date this Form is Completed: _____

Event	Sponsoring Club	New Event	One Time Event	Ongoing Event	Club Advisor	Estimated Net Revenue	Actual Net Revenue

Report prepared by: _____
Signature, Title and Date

Club Advisor: _____
Signature, Title and Date

Site Administrator or Designee _____
Signature, Title and Date

Presented to ASB on: _____
Signature, Title and Date