



FINAL STATEMENT AT CONCLUSION OF REVENUE PRODUCING ACTIVITY

Name of Activity: _____
 Date of Event: _____
 Faculty Advisor: _____

A. INCOME

Ticket Sales	Number Printed

Sold

From: _____	To: _____ @ \$ _____	= \$ _____
From: _____	To: _____ @ \$ _____	= \$ _____
From: _____	To: _____ @ \$ _____	= \$ _____
From: _____	To: _____ @ \$ _____	= \$ _____

Unsold

From: _____	To: _____
From: _____	To: _____
From: _____	To: _____
From: _____	To: _____

Complimentary

From: _____	To: _____
From: _____	To: _____
From: _____	To: _____
From: _____	To: _____

Unaccounted Tickets

From: _____	To: _____
From: _____	To: _____
From: _____	To: _____
From: _____	To: _____

B. OTHER SOURCES OF INCOME (Please Specify)

Source of Income

Amount Raised
\$ _____
\$ _____
\$ _____

C. RECONCILIATION

Anticipated Income (From "Authorization to Collect General School Funds" form)	\$ _____
Amount Raised (Actual)	\$ _____
Difference	\$ _____
Explanation (If difference exists)	_____

D. EXPENSES

Total Expense (Each expense should be recorded on the "Request for Expenditure" form -- Exhibit F and maintained by the school's treasurer.)	\$ _____
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E. PROFIT OR LOSS

Profit	\$ _____
Loss	\$ _____

I certify that the information in this report is, to the best of my knowledge, correct.

 Faculty Advisor (Print)

 Faculty Advisor (Signature)

 Date