



PRELIMINARY SALES PROJECT FORM # _____

Organization/Event _____ **Fund-** _____ - _____

Date(s) of Activity: (start) _____ (end) _____ Advisor _____

Brief description of sales project: _____

Brief description of activity: _____

Estimated money to be raised: \$ _____

Advisor Date Principal Date Superintendent Date

After Sales Project – Complete Final Report

FINAL REPORT - SALES PROJECT

Total Receipts \$ _____

Ticket Report Attached YES/ NO (circle one)

Minus Expenses \$ _____

P.O.# _____

Net Profit/ Loss \$ _____

P.O.# _____

Advisor Date

Principal Date

Advisor: complete Sales Project Form, forward to principal for approval

Principal: sign and forward to treasurer's office

Treasurer: forward to superintendent for signature, keep original, return a copy to advisor

After Project

Advisor: complete bottom of form, sign, and forward to principal's office

Principal: sign form, retain a copy for files and send signed copy to treasurer's office

Please submit requisitions for student activity expenses at least two weeks prior to event.