

Madera Community College Revenue Potential / Fundraising Deposit Form

STEP 1	Please complete Step 1 prior to the fundraiser and attach the form to the fundraiser request
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Event/Club Name: _____ Event/Activity Date: _____

Advisor/Instructor/Coordinator: _____ Account #/GL Code _____

Projected Sales

	Item	Projected Sale	Projected Quantity	Total
Item #1				
Item #2				
Item #3				
Total Projected				

Event Cost

Please provide the cost associated with the items that will be sold or indicate if these were donated.

	Item	Cost	Donation	Funding Source
Item #1			Yes / No	
Item #2			Yes / No	
Item #3			Yes / No	
Supply Advance				

STEP 2	The following section should be completed immediately after the event and turned into the Business Office in AM-118.
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	Item	Number Sold	Selling Price	Total Revenue
Item #1				
Item #2				
Item #3				
Total Revenue				

	# of Bills/Coins	Total
\$100s		
\$50s		
\$20s		
\$10s		
\$5		
\$1s		
Half Dollars		
Quarters		
Dimes		
Nickles		
Pennies		
Checks		
Total Deposit		

If there's a discrepancy between Total Revenue and Total Deposit, please explain:

COMPLETE AFTER FUNDRAISER
Prepared by: _____
Reviewed by: _____
Date of Deposit: _____

1. Supply Advance	
2. Total Revenue	
3. Total Profit/Loss	