

SALES EVENT FORM

Event: _____ Date: _____

Fund Name: _____ Fund #: _____

Complete Section I & II when project/event is complete
Sign and forward to your building principal

Section I

Purchase Order	Amount

Total Amount Paid: _____

Section II Receipts (Deposits)

Date	Amount

Total Receipts: _____

Amount Paid: _____

Profit: _____

Explain any differences you have, such as uncollected funds.

Advisor Date Principal Date

Athletic Director Date Treasurer Date