

**St. Clair County Board of Education  
Local School Accounting Manual**

**FUNDRAISER PROFIT LOSS**

School: \_\_\_\_\_

Date(s) of Event/Sale: \_\_\_\_\_

Event/Sale: \_\_\_\_\_

Teacher/Sponsor: \_\_\_\_\_

Club/Organization Name (if applicable): \_\_\_\_\_

**Required Documentation:**

Attach a Detailed Activity Report

Highlight all entries for this fundraiser

Enter deposit and expense totals as noted

**Total amount deposited from fundraiser: \$** \_\_\_\_\_

**Total expenses of fundraiser: \$** \_\_\_\_\_

**Total Profit/Loss from fundraiser: \$** \_\_\_\_\_

\_\_\_\_\_  
**Signature of Teacher/Sponsor**

\_\_\_\_\_  
**Principal Signature**