

(A) Budget
 (B) Statement of Profit and Loss

Rev. 9/2016
 EXHIBIT E

* complete section A prior to sale or event; complete section B at completion of sale and turn into main office secretary

(A) Today's Date: _____
 Club Name _____
 Activity Planned _____ Activity Date(s) _____

Indicate one: _____ Fund Raising Event _____ Service Project _____ Other _____

Anticipated Revenue (expected) \$ _____
 Anticipated Expenses (expected) \$ _____
 Anticipated Profit (expected) \$ _____

(B) Is this Fundraiser Subject to NYS Sales Tax? Yes or No (Circle One)

Actual Revenue (Income)

| Receipt Number | Receipt Date | Description of Sale | Ticket Numbers | | Total # Sold | Sale Price Per Item | Total Receipt Amount |
|----------------|--------------|---------------------|--------------------|------------------|--------------|---------------------|----------------------|
| | | | From and Including | To and Including | | | |
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Total Receipts \$0.00

Actual Expenses (Disbursements)

Were Taxes Paid at Time Merchandise was Purchased? Yes or No (Circle One)
 If you answered yes above.....How much tax was paid at time of Purchase \$ _____

Please attach copy of all receipts.

| Date | Payee | Check # | Total Items Purchased (ie. 40 candy bars @ 1.00) | Amount |
|------|-------|---------|---|--------|
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Total Disbursements: \$0.00

Remaining

| Inventory | Description |
|------------|---|
| example 10 | candy bars **indicate "none" if no inventory remaining |
| | |
| | |

Profit (Loss) \$0.00

 Club Treasurer

 Advisor

 Date