

Collection of Funds Form

Name of Club/Organization _____

Event _____ Date of Event _____

Was this a Fundraiser for Charity? ___Yes ___No

If Yes, please attach an "About Us" print out from the organization you are planning to donate to?

Please list any items sold and amounts charged:

Total Amount Collected \$ _____

*By signing below you certify that the above information is correct to the best of your knowledge.

President/Treasurer _____

Office of Student Activities _____

Deposited into account #: _____

White Copy

Pink Copy

Yellow Copy

File

Club/Organization

Advisor