



STUDENT BUSINESS OFFICE

714-564-6430

Non Event Fundraising Revenue Potential

This form should accompany Fundraising Authorization Form. Please attach: invoices or quotes for products to be purchased for resale, flyer, and club minutes approving fundraiser, deposit receipts

Event Name: _____ Event Date(s): _____

Organization: _____ SBO Account: _____

Requestor: _____ Phone: _____ Email: _____

Advisor/Dean/Director: _____ Phone: _____

To be completed prior to event/sales:

Description of Items to be sold: _____

Quantity Purchased: _____ Purchase Price per unit: _____

Planned sale price per unit: _____

Estimated Potential Net Revenue: _____

Date: _____ Requestor Signature: _____

Date: _____ Advisor/Dean/Director Signature: _____

Date: _____ Student Business Office: _____

To be completed after Event/Sales:

Total Items sold: _____ Sale Price: _____

Total Items lost/stolen: _____ Total Items damaged: _____

Total Funds Collected: _____ Bank/Credit Card Fees: _____

Net Total event/sales revenue: _____

Deposit Date: _____ Deposit Receipt Number: _____

Date: _____ Requestor Signature _____

Date: _____ Advisor/Dean/Director Signature: _____

Date: _____ Student Business Office: _____