

Income Report Student Organization

Please Note: This report is due within 2 business days of the event date.

Please check: Fundraiser
 Raffle (CA law requires that at least 90% of gross receipts from a raffle go directly to CA benefit or charity.)

Name of person completing this report: _____

Phone Number: _____ Email Address: _____

Student Organization Name: _____

Fundraising/Raffle Activity (List items sold): _____

Date of Fundraiser/Raffle: _____

Location of Fundraiser/Raffle: _____

Brief Summary of Sales (Use back side of sheet if necessary):

Cost of each item sold: _____ Number of items sold: _____

Total/Gross Income Received: _____ Expenses: _____

Net Income (Gross – Expenses = Net): _____

How will the net income be utilized? _____

Will the net income be donated? If yes, to what organization and how much will be donated? _____

Net income to be deposited to: On-Campus Student Organization Income Account
 Off-Campus Student Organization Bank Account

Event Evaluation:

Would you recommend this fundraising/raffle activity? _____

Do you have any suggestions for making this more successful? _____

Please return this form to your Student Life Biz Ops Fund Manager.