COMPLETED PROJECT

Project Name: _____ **Date(s):** _____

Sponsor/Advisor: _____ **Bldg/Dept:** _____

EXPENSES: LIST ALL PURCHASE ORDER NUMBERS

Check No.	Date	Description and Purchase Order No.	Amount Paid
Total Gross Expenses			

RECEIPTS: A pre-numbered receipt should be given to each person that purchases an item, ticket, or admission, etc. Please record the receipt number (or range) below. Use the additional page if needed.

Date Deposited	Receipt No. or range given to student or other making the purchase	Receipt No. or range from building secretary	Amount
Receipts from additional page (attached)			
Total Gross Receipts*			

*Total receipts should match the total of Pay-Ins to building secretary

Was everything sold?   Yes or   No

   If NO, list the number and location of remaining items: No. _____ Location: _____

   Total amount NOT accounted for: $_____

Profit Worksheet:

   Gross receipts from sales: _____

   Less total expenses: _____

      Net profit/loss: _____

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ALL SIGNATURES REQUIRED TO CLOSE PROJECT

_____   _____

Advisor/Coordinator Signature   Date   Principal/Dept. Administrator Signature   Date

_____   _____

Treasurer Signature   Date   Superintendent Signature   Date

COMPLETED PROJECT

Sponsor/Advisor: _____ **Project Name:** _____

Use this page if you need to record additional receipts for your completed project.

Check No.	Date	Description and Purchase Order No.	Amount Paid
Total of Additional Gross Receipts (add to Completed Project page)			