

Revenue Potential (Fundraising Budget versus Actual Statement)

Name of School: DHHS

Name of Club: GIRLS VOLLEYBALL

Revenue Potential/Fundraising Budget versus Actual Statement

Fiscal Year: _____

Name of Event: Snack Bar for Volleyball Games

Date of Event: 9/17, 9/24, 10/8, ~~10/14~~ 10/14 2019

Date Form Completed: 2/5/20

| EXPECTED REVENUE: | BUDGET | ACTUAL | DIFFERENCE |
|--|--------|-----------------------------|---------------------------|
| Sales quantity x Sales price | \$ 400 | \$ 352.77 382.44 | \$ 14.23 17.56 |
| OTHER REVENUE: | | | |
| Donations, Sales of ads, etc. | \$ | \$ | \$ |
| TOTAL REVENUE (A) | \$ | \$ | \$ |
| EXPENSES: | | | |
| Product quantity x Cost (per invoice) | \$ 100 | \$ 85.77 | \$ 14.23 |
| OTHER EXPENSES: | | | |
| Freight | \$ | \$ | \$ |
| Advertising | \$ | \$ | \$ |
| Other | \$ | \$ | \$ |
| TOTAL EXPENSES (B) | \$ | \$ | \$ |

OTHER: (C)

Items Donated or Given as Prizes –
Quantity x Cost

\$

\$

\$

TOTAL PROFIT (A-B-C)

\$

300

\$

296.67

\$

3.33

Submitted and Approved by:

Student Club Representative: _____

Signature, Title and Date

Club Advisor: _____



HEAD COACH GIRLS VIB

Signature, Title and Date

Principal/School Administrator: _____

Signature, Title and Date

Recorded in ASB Student Council Minutes on: _____

Date