

# Fundraising Completion Report

Event Start Date:

Event End Date:

Event Description as per the Fundraising Approval Form:

Cash Receipts Amount: \$ 0.00

List Check Numbers and Amounts:	#	\$ 0.00
(List others on back)	#	\$ 0.00
	#	\$ 0.00
	#	\$ 0.00
	#	\$ 0.00
	#	\$ 0.00
	#	\$ 0.00

Expenses Occurred (listed seperately)	Expense	\$ 0.00
	Expense	\$ 0.00
	Expense	\$ 0.00
	Expense	\$ 0.00

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Total Profit Amount submitted to the NYS Treasurer: \$ 0.00

A description of any problems or issues that occurred during the event:

Please submit with this form:

1. Copies of all Checks
2. Cash Receipts with three (3) separate signatures verifying the amounts collected
3. Copies of all expenses that were incurred during this event
4. Copies of any permits or forms that was needed for the event

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(Signature of the person submitting this form)

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Date

Updated: 10/12/2014

Version: 1.0