College Life Fundraiser/Money Collection Form

Please complete form prior to collecting money. Once completed, please return form to Office of College Life Front Desk.

1. Student Organization Name: ____________________________________________

2. Student Organization Contact: ____________________________________________

3. Contact Phone: ______________________ E-mail: ______________________

4. Description of the Fundraiser or money collection (list ALL items being sold, entry fees, donations, etc):

________________________________________________________________________

Please attach copy of fundraiser flyer/postcard/letter if any.

5. Date and Day of Event: ________________ Location: ______________________


7. Selling Price Per Unit and Number of Units: ______________________

________________________________________________________________________

Estimated:

8. Income: ____________ Expenses: ____________ Profit/Loss: ____________

   • Student Organization Officer:
   
   Printed Name ___________________ Signature ___________________ Date ____________

   • Student Organization Advisor:
   
   Printed Name ___________________ Signature ___________________ Date ____________

Any student organization willfully and knowingly violating any of the DASB/ICC budget guidelines may have its funds frozen immediately. The student organization may be placed on inactive status and student(s) involved may be referred to the Student Discipline Officer.

For Office Use Only:

• College Life Specialist/Coordinator:

   Printed Name ___________________ Signature ___________________ Date ____________

• Student Accounts Office:

   Printed Name ___________________ Signature ___________________ Date ____________

Actual:

Income: ____________ Expenses: ____________ Profit/Loss: ____________

   • Student Accounts Office:

   Printed Name ___________________ Signature ___________________ Date ____________