

FRANCIS MARION UNIVERSITY STUDENT ORGANIZATION FUNDRAISING INCOME REPORT

This form is to be **completed** and **returned** to the Office of Student Life, University Center Room 205.
After the event has ended you have **10 days** to complete this form and **return it to Student Life**.

This form must be on file in the Office of Student Life before any further fund-raisers for the organization can be approved.

Name of Organization: _____

Date(s) of Fund-raiser: ____/____/____ Date of Report: ____/____/____

Purpose of Fund-raiser: _____

Total Funds Received (To the nearest dollar amount): \$_____

Total Expenses (To the nearest dollar amount): \$_____

Net Income from Fund raiser: \$_____

CHARITY VERIFICATION

If the proceeds from this fund-raiser are to benefit a charity, a representative of the charitable organization must sign the statement below:

My organization, _____, has received funds in the amount of
\$_____ from the above-named Francis Marion University organization.

Signature: _____ Title: _____ Date: ____/____/____

STATEMENT OF EARNINGS

An officer of the sponsoring FMU organization must sign below:

I attest that my organization completed the above fund-raiser in accordance with Francis Marion University guidelines and that the above earnings are true and correct to the best of my knowledge.

Signature: _____ Date: ____/____/____