

TYPE OF FUNDRAISER:			Purchase Order Number:			
STAFF PERSON RESPONSIBLE:			Date:			
Description of Items Purchased	Quantity	Unit Cost	Total Cost	Mark-Up	Unit Price	Total Price
TOTALS						
	EXPECTED SALES:					
	(total price from				-	
	TOTAL COS	ST:				
	(from above)					
	EXPECTED PROFIT:					
	(subtract total cost from expected sales)					
Following the fundraiser, complete the section below, list remaining inventory.						
Description of Items Purchased	Quantity	Unit Cost	Total Cost	Total Price		
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EXPLANATION OF VARIANCE:						
CHORT CHAMARY OF HOW THE						
SHORT SUMMARY OF HOW THIS FUNDRAISER WENT:						
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