

Your fundraiser has been approved! Please use this form at the conclusion of the fundraiser to submit a financial report to the Superintendent's Office.



SHARON CITY SCHOOL DISTRICT

FUND RAISING PROJECT FINANCIAL STATEMENT

To be completed by the sponsor of any fundraising project which has involved the participation of Sharon students or which has been conducted during school-sponsored activities or events. Please return to the Office of the Superintendent within 30 days following conclusion of each project.

Organization Name _____

President/Chairperson _____

Address _____ Phone _____

Date of the Fundraiser _____

Description of Fundraiser _____

Purpose of Funds Raised: _____

Gross Receipts _____

Expenses _____

Net Income _____

Comments:

President/Chairperson's Signature

Date

Return to the Superintendent's Office, 215 Forker Blvd., Sharon, PA 16146.