



Student Activity Account

Event Financial Report

To be completed for all fund raisers, activities etc. at the completion of the event.

Club: _____

Date: _____

Event: _____

Event Date(s): _____

Income:

Deposit Date:

Source:

Amount:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Income: _____

Expenditures:

Item:

Check Number:

Amount:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Expense: _____

Profit/(Loss): _____

Submitted By: _____

Date: _____

Reviewed By: _____

Date: _____