

Support Organization Annual (or Monthly) Financial Report

School Year (or Month) Ending _____ Organization Name _____

President _____ Phone Number _____

Treasurer _____ Phone Number _____

1. Objectives and activities completed by the organization:

2. Money in account at the beginning of the school year (or month): \$ _____

3. Money raised during the school year (or month) (by activity of fundraiser):

A.	_____	\$ _____
B.	_____	\$ _____
C.	_____	\$ _____
D.	_____	\$ _____
E.	_____	\$ _____
F.	_____	\$ _____
G.	_____	\$ _____
H.	_____	\$ _____
I.	_____	\$ _____
J.	_____	\$ _____
K.	_____	\$ _____
L.	_____	\$ _____
M.	_____	\$ _____
N.	_____	\$ _____
O.	_____	\$ _____
Total Revenue for the school year (or month)		\$ _____

4. Activities, equipment, materials, services, etc., purchased:

P.	_____	\$ _____
Q.	_____	\$ _____
R.	_____	\$ _____
S.	_____	\$ _____
T.	_____	\$ _____
U.	_____	\$ _____
V.	_____	\$ _____

W. _____	\$ _____
X. _____	\$ _____
Y. _____	\$ _____
Z. _____	\$ _____
AA. _____	\$ _____
BB. _____	\$ _____
CC. _____	\$ _____
DD. _____	\$ _____
Total Expenditure for the school year (or month)	\$ _____

5. Money in the account at end of the school year (or month) \$ _____

Preparer's Signature

Date