

St. Paul VI Parish Financial Report for Events & Fundraisers

(For Parish/School Groups, Organizations, & Ministries)

Contact Information

Name: _____ Group Name: _____

Phone: _____ Email: _____

Name of Event: _____

Group Sponsoring Event: _____ Date of Event: _____

Income

Cost per person/ticket: \$ _____ Number of people/tickets sold: _____

Income (based on ticket sales): \$ _____

Donations (not sponsorships/businesses): \$ _____

Sponsorship Donations: \$ _____

Raffle/Games of Chance Income: \$ _____

Other Income, please specify: _____ \$ _____

TOTAL INCOME \$ _____

Expense

Food Expense: \$ _____

Beverage Expense (non-alcoholic): \$ _____

Alcoholic Beverage Expense: \$ _____

Cost of Entertainment: \$ _____

Cost of Licenses (raffle, bingo, alcohol, etc): \$ _____

Cost of printing, mailing, marketing: \$ _____

Other expenses, please specify: _____ \$ _____

TOTAL INCOME \$ _____

NET PROCEEDS \$ _____

(PLEASE TURN OVER)

Please share with us what your event proceeds will be supporting.

BINGO (Please fill out this section if your event/fundraiser included BINGO):

Did you purchase any BINGO supplies or equipment? Yes No If yes, please complete:

Supplier name: _____ License #: _____

Address: _____

TOTAL PRIZES, PLAYERS, AND PROCEEDS FOR EVENT

Value of Prizes Awarded: \$ _____

Number of Players: _____

Gross Proceeds: \$ _____

5% Gross Proceeds \$ _____ = Taxes Due

Questions/Comments/Notes/Details:



Scan to complete form electronically.