

Parsippany Hills High School Booster Club Statement of Purpose

School Year: _____

Booster Club Name: _____

President: _____ **Phone Number** _____

Address: _____ Email Address _____

Vice –Pres.: _____ **Phone Number** _____

Address: _____ Email Address _____

Treasurer: _____ **Phone Number** _____

Address: _____ Email Address _____

Officers: _____ **Phone Number** _____

Address: _____ Email Address _____

***(use additional page if necessary)

Objectives of the Club and a brief statement as to how obtaining the objectives will have a positive effect on the athletic program:

Approval by: _____ Date _____

(Athletic Director)

Parsippany Hills High School Booster Club Budget

School Year: _____

Booster Club Name: _____

Receipts:

Dues \$ _____

Sales (Fund Raisers) \$ _____

Donations (Cash) \$ _____

Ads \$ _____

Other \$ _____

Total Receipts: \$ _____

Expenses:

Contracted Services \$ _____

Fees \$ _____

Purchases:

Equipment \$ _____

Concessions \$ _____

Fund Raising Items \$ _____

Other \$ _____

Total Expenses \$ _____

Submitted by: _____ Date: _____

(President or Treasurer)

Approved by: _____ Date: _____

(Athletic Director)

Parsippany Hills High School Booster Club Annual Report

School Year: _____

Booster Club Name: _____

President: _____ Phone Number _____

Address: _____ Email Address _____

1. Objectives and activities completed by the Club:

2. Money in account at the beginning of the school year: \$ _____

3. Money raised during the school year:

A. _____ \$ _____

B. _____ \$ _____

C. _____ \$ _____

D. _____ \$ _____

E. _____ \$ _____

Total revenue for the school year \$ _____

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

A. _____ \$ _____

B. _____ \$ _____

C. _____ \$ _____

D. _____ \$ _____

E. _____ \$ _____

Total expenditures for the school year \$ _____

5. Money in account at end of school year \$ _____

Preparer's Signature

Date

Parsippany Hills High School Fund Raiser Request Form

School Year: _____

Booster Club Name: _____

Beginning Sale Date: _____ Ending Sale Date: _____

NOTE:
DOOR TO DOOR SOLICITATION IS NOT ALLOWED BY PTHSD CLUBS/ORGANIZATIONS.

For what purpose(s) will the proceeds be used? _____

Description of Fundraising Project: _____

Price(s) to be charged per item: \$ _____ Cost per item: \$ _____

Total amount earned from fundraising during this school year (excluding this fundraiser)
\$ _____

Enter the number of fundraising activities this school year for this organization or club: _____

EXPECTED INCOME (Product Sales or Sale of Services)

Estimated number of items to be sold	_____ (1)
Price to be charged for each item	_____ (2)
Estimated gross receipts (#1 x #2)	_____ (3)
Cost of items to be sold (per item)	_____ (4)
Total cost of items (#1 x #4)	_____ (5)
Other expenses anticipated (advertising, printing, etc.)	_____ (6)
Estimated profit (#3 - #5 - #6)	_____ (7)

Signature of President Date

Signature of Treasurer Date

Approved by Athletic Director

Date

Date Application Received

Parsippany Hills High School Audit Report

School Year: _____

Booster Club Name: _____

Date _____

The Audit Committee members named below have reviewed the financial reports and related financial activity for the time period of _____ through _____, in detail. These members agree that the Financial Report and the related financial activity are (check one):

_____ proper and correct

_____ correct with the following exceptions listed below

_____ incorrect and/or incomplete.

1)

2)

3)

4)

5)

6)

To prevent the above exceptions from occurring in the future, the following steps should be taken: (list actions)

1)

2)

3)

4)

5)

6)

Balance on Hand (date of last audit)

\$ _____

Receipts

(from last audit to date of current audit)

\$ _____

Disbursements

(from last audit to date of current audit)

\$ _____

Balance on Hand (date of current audit)

\$ _____

Printed Name

Officer Title/Member

Signature

Date

Printed Name

Officer Title/Member

Signature

Date

Printed Name

Officer Title/Member

Signature

Date