

AGPA Fundraising Proceeds Form

(To Be Submitted At the Conclusion of A Fundraiser)

Cost Group: _____ **Name of Fundraiser:** _____

Contact Person: _____

Total Checks: _____

Total Cash: _____

Total Received: _____

Fundraiser Expenses Charged/Paid by AGPA: _____

Distribution of Credit

Net Proceeds of Fundraiser: _____ **should be split evenly among the following families:** **Any members who voluntarily elect to opt out of receiving funds must have email documentation attached to this form**

SUBMITTED WITH DEPOSIT BY: _____ **DATE:** _____