CHARITY INFORMATION ON SCHOOL GENERATED FUNDS ACTIVITIES



NAME OF SCHOOL:

and the second s	For the Veer ending August	-+ 24 20	
<u> </u>	For the Year ending Augus	st 31, 20	
*gift shops *bookstores, publications, and tapes *donated clothing, furniture, and other u *education, courses, seminars, and con *artistic performances, theatre, concerts *shelter, housing, and rooms *parking *other rentals (e.g. banquet hall, equipm *housekeeping services *transportation *food, cafeteria services, meals and cat *medical and health care *counselling *nursery and day care	ferences s, Entrance fee nent) ering or services (e.g. swimming pool, exercise eements	s charged _\$	
	et revenue to the School from these so		
GROSS REVENUE	NET REVEN	UE	
<i>Did the School use any of the followi</i> *auctions *mail campaigns (including email) *telephone solicitation *door-to-door canvassing *sales (e.g. cookies, chocolate bars) *collection boxes *advertisements, posters, flyers, and radio at *telethons *anonymous donations, loose collections *bingos, casino nights *swim-a-thons, walk-a-thons, bike-a-thons, e *draws and lotteries *fund-raising dinners, galas, concerts - *tournaments and sports events *other (please specify)	nd TV commercials tc Entrance	fees charged _\$	
How much was raised from these act	ivities only \$		
Describe the SGF activity which gene	erated the most revenue.		
Type of Activity?			
How often was this activity held during t	he year?		
What was the percentage of volunteers	working on the activity?	(Enter decin	nal for %)
Was a professional fund-raiser hired? I	f yes, how much was paid to fund-raiser?		
What were the NET proceeds from the	activity?		
GIFTS TO QUALIFIED DONEES (e.g.	Unicef, Foster Parents Plan, etc.)		
Name of Donee	Business Number	Location	Amount of Gift

PLEASE ATTACH ADDITIONAL LIST OF DONEES IF REQURED