



Orcutt Academy High School

ASB Club Budget

School Year: _____

Club Name: _____

Date of Budget: _____

Part 1: Income

Income (List Type)	Description	Income
Donations		
Fundraisers		

Totals:

Part 2: Expenses

Expenses (List Type)	Description	Expenses
Supplies For Fundraisers		

Totals:

Part 3: Difference between Budgeted Income & Expenses:

Profit or Loss: _____

Part 4: Carry-Over from previous year:

Carry-Over: _____

Part 5: Difference between Profit/Loss, including Carry Over:

Difference: _____

Report Prepared by Club Treasurer:

Report Reviewed by Club Advisor:

Print Name

Print Name

Signature and Date

Signature and Date

Reviewed and Accepted by OAHS Business Office

Michelle Downing

Print Name

Signature and Date



Orcutt Academy High School

ASB Event or Fundraising Petition

All Events and Fundraisers, whether on or off campus, must be turned into the OAHS Business Office 2 weeks prior to the proposed event or fundraiser and must be approved by the Principal and District Superintendent or School Board.

Club Name: _____

Proposed Event: _____

Description of Event: _____

Location of Proposed Event: _____

Proposed Date(s) of Event: _____ Time of Event: _____

Item for Sale: _____ Price of Item: _____

Type of Event: Activity Dance Fundraiser

Facilities Use: BBQ Pit K2 Multi-Use Room

**** REQUIRED: Attach the "Completed ASB FUNDRAISING REVENUE POTENTIAL FORM" ****

Club Student Representative: _____ (Signature & Date)

Club Treasurer: _____ (Signature & Date)

Club Advisor: _____ (Signature & Date)

School Principal: Rhett Carter _____ (Signature & Date)

Received by Business Office: Lauren Whitham _____ (Signature & Date)

Approved by District: _____ (Signature & Date)

Reason for disapproval, if applicable:



Orcutt Academy High School

ASB Fundraising Revenue Potential Form

Club: _____

Date of Activity/Event: _____

Activity/Event: _____

Revenue

Projected: _____

Actual: _____

Difference: _____

Areas of Income

Pre-Sales: _____

At Door Sales: _____

Advertising: _____

Concession: _____

Donations: _____

Expenses

Projected: _____

Actual: _____

Difference: _____

Areas of Expenses

Supplies: _____

Decorations: _____

Advertising: _____

Rental Supplies: _____

DJ: _____

Net Profit or Loss:

Actual Income: _____

Actual Expenses: _____

Actual Profit/Loss: _____

Inventory Left on Hand

Circle one that applies:

Value: _____

This is mandatory - Please describe your fundraiser:

For our "Club" or "Class of" to raise money to support student body activities and/or senior class activities.

Signature of Advisor: _____

Date Submitted: _____

Reviewed and Accepted by OAHS Business Office

Lauren Whitham

Print Name

Signature and Date



Orcutt Academy High School

ASB Deposit Form

Report must be turned in with all monies collected and other required supporting documents

Club Name: _____

Date of Deposit: 3/6/2018

Description: _____

If this is a fundraiser, please attach a Completed Fundraising Revenue Potential Form: _____

Currency

\$1.00	x	=	_____	\$20.00	x	=	_____
\$2.00	x	=	_____	\$50.00	x	=	_____
\$5.00	x	=	_____	\$100.00	x	=	_____
\$10.00	x	=	_____				

Total Currency: _____

Coin - Wrapped Rolls

NO. OF ROLLS

\$0.50	x	=	_____
\$2.00	x	=	_____
\$5.00	x	=	_____
\$10.00	x	=	_____

Coin - Loose

\$0.01	x	=	_____
\$0.05	x	=	_____
\$0.10	x	=	_____
\$0.25	x	=	_____
\$0.50	x	=	_____
\$1.00	x	=	_____

Total Coin: _____

Checks

Group checks by dollar amount and include below.

\$25.00	x	=	_____	x	=	_____
\$100.00	x	=	_____	x	=	_____
\$125.00	x	=	_____	x	=	_____
\$140.00	x	=	_____	x	=	_____
\$240.00	x	=	_____	x	=	_____
\$15.00	x	=	_____	x	=	_____
\$10.00	x	=	_____	x	=	_____
\$5.00	x	=	_____	x	=	_____
\$7.00	x	=	_____	x	=	_____
	x	=	_____	x	=	_____

Total Checks: _____

Total Deposit: _____

Club Treasurer: _____

Print Name & Sign Date: _____

Verified by Club Advisor: _____

Print Name & Sign Date: _____

OAHS Business Office Use Only:

Amount of Deposit Received: \$ _____

Cash Over or Short: _____

Received by: Lauren Whitham

Received On: _____

Orcutt Academy High School

ASB DEPOSIT FORM DETAIL

Currency

\$1.00 x _____ = _____	\$20.00 x _____ = _____
\$2.00 x _____ = _____	\$50.00 x _____ = _____
\$5.00 x _____ = _____	\$100.00 x _____ = _____
\$10.00 x _____ = _____	
	Total Currency: _____

Coin - Wrapped Rolls

NO. OF ROLLS

\$0.50 x _____ = _____	
\$2.00 x _____ = _____	
\$5.00 x _____ = _____	
\$10.00 x _____ = _____	

Coin - Loose

\$0.01 x _____ = _____	
\$0.05 x _____ = _____	
\$0.10 x _____ = _____	
\$0.25 x _____ = _____	
\$0.50 x _____ = _____	
\$1.00 x _____ = _____	
	Total Coin: _____

Checks

Group checks by amount and include below.

_____ x _____ = _____	_____ x _____ = _____
_____ x _____ = _____	_____ x _____ = _____
_____ x _____ = _____	_____ x _____ = _____
_____ x _____ = _____	_____ x _____ = _____
_____ x _____ = _____	_____ x _____ = _____
_____ x _____ = _____	_____ x _____ = _____
_____ x _____ = _____	_____ x _____ = _____
_____ x _____ = _____	_____ x _____ = _____
_____ x _____ = _____	_____ x _____ = _____
_____ x _____ = _____	_____ x _____ = _____

of Cks: _____ **Total Checks:** _____

Total Deposit: _____

Submitted by: Lauren Whitham

Business Office Signature _____

ASB Deposit Summary

	Description	Cks \$	Cash \$	Total
1				
2				
3				
4				
5				
deposited x/x/x		Subtotal:		

Total Deposit: _____



Orcutt Academy High School

ASB Fundraising Tally Sheet

Club Name: _____

Event or Fundraiser: _____

Dates: _____

Item(s)	Tally Marks	Total Marks	Price	Sales

Total Marks: _____ **Total Sales:** _____

Total Cash: _____

Total Deposit: _____

Total Checks: _____

Difference: _____

Currency

\$1.00	x	_____	=	_____	\$20.00	x	_____	=	_____
\$2.00	x	_____	=	_____	\$50.00	x	_____	=	_____
\$5.00	x	_____	=	_____	\$100.00	x	_____	=	_____
\$10.00	x	_____	=	_____					

Total Currency: _____

Coin - Wrapped Rolls

NO. OF ROLLS

\$0.50	x	_____	=	_____
\$2.00	x	_____	=	_____
\$5.00	x	_____	=	_____
\$10.00	x	_____	=	_____

Coin - Loose

\$0.01	x	_____	=	_____
\$0.05	x	_____	=	_____
\$0.10	x	_____	=	_____
\$0.25	x	_____	=	_____
\$0.50	x	_____	=	_____
\$1.00	x	_____	=	_____

Total Coin: _____



Orcutt Academy High School

ASB Fundraising Tally Sheet

Club Name: _____

Event or Fundraiser: _____

Dates: _____

Checks

Group checks by dollar amount and include below.

_____	x	_____	=	_____	# of Cks:	_____	Total Checks:	_____
_____	x	_____	=	_____				
_____	x	_____	=	_____				
_____	x	_____	=	_____			Total Currency:	_____
_____	x	_____	=	_____			Total Coin:	_____
_____	x	_____	=	_____			Total Cash:	_____
_____	x	_____	=	_____				
_____	x	_____	=	_____			Total Checks:	_____
_____	x	_____	=	_____			Total Deposit:	_____
_____	x	_____	=	_____				=====

Verified By: _____ Treasurer Date: _____

Verified By: _____ Advisor Date: _____

Received By: Lauren Whitham OAHS Business Office

Orcutt Academy High School

ASB Cash Box Reconciliation for Deposit

Club: _____
 Event: _____
 Location: _____

Date of Event: _____
 Advisor's Name: _____
 Starting Cash: _____ (A)

Tally Marks: Sadies Concession Sales

Total Tally Marks: _____ x _____ = \$ _____
 _____ x _____ = \$ _____

Donations: \$ _____
 Total Sales: \$ _____ (B)

Total Cash in Box (includes starting cash)

CURRENCY			
\$1.00	x	_____	=
\$2.00	x	_____	=
\$5.00	x	_____	=
\$10.00	x	_____	=
\$20.00	x	_____	=
\$50.00	x	_____	=
\$100.00	x	_____	=
Total Currency:		_____	(C)

COIN			
\$0.01	x	_____	=
\$0.05	x	_____	=
\$0.10	x	_____	=
\$0.25	x	_____	=
\$0.50	x	_____	=
\$1.00	x	_____	=
Total Coin:		_____	(D)

*Group checks by dollar amount and include below.

_____	x	_____	=	_____	x	_____	=
_____	x	_____	=	_____	x	_____	=
_____	x	_____	=	_____	x	_____	=
_____	x	_____	=	_____	x	_____	=
_____	x	_____	=	_____	x	_____	=

Total Checks: _____ (E)

Orcutt Academy High School

ASB Cash Box Reconciliation for Deposit

Club: _____
Event: _____
Location: _____

Date of Event: _____
Advisor's Name: _____
Starting Cash: _____ (A)

Amount to Deposit

Total Currency: _____ (C)

Total Coin: _____ (D)

Total Checks: _____ (E)

Total Cash in Box (includes starting cash): _____

Less: Starting Cash: _____ (A)

Total Deposit: _____ (B)

(Total Sales & Total Deposit should be the same amount)

Adjustments (if any): _____

Amount to Deposit: _____ (B)

Verified by: _____ Treasurer Date: _____

Verified by: _____ Advisor Date: _____

Received by: Lauren Whitham Business Office Date: _____



Orcutt Academy High School

ASB Authorization to Pay

Club Name: _____

Date: _____ 3/6/2018 _____

The purchases to be paid were approved by ASB - Meeting Minutes dated (see attached)

Vendor Name	Description of Purchased Item(s)	Amount
#ASB17-00001	Total	

(PLEASE ATTACH ORIGINAL RECEIPTS TO 8-1/2" x 11" SHEETS OF PAPER)

**** APPROVAL ****

Payments WILL NOT BE MADE without proper authorizing signatures below:

We have confirmed that the payment being made to the above vendor/claimant are for ASB purchases only and are located at our school. (Ed. Code 32425,39805,35160)

Club Treasurer: Collin Lewis (Signature & Date)

Advisor: Leigh Stephenson (Signature & Date)

School Principal: Rhett Carter (Signature & Date)

For OAHS Business Office Use Only:

Check #: _____ Amount: \$ _____

Processed By: Lauren Whitham (Signature & Date)

Check Mailed or Sent to District: Lauren Whitham (Signature & Date)



Orcutt Academy High School

ASB Advisor Reimbursement Form

Club Name: _____

Event: _____

Advisor: _____

ITEMIZATION OF PURCHASES AND CERTIFICATION FOR REIMBURSEMENT

Vendor	Description of Purchased Item(s)	Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total _____

***** PLEASE ATTACH ORIGINAL RECEIPTS TO AN 8 1/2" x 11" SHEET OF PAPER *****

I have confirmed that the receipts being reimbursed to me, the Advisor noted above, are for ASB use and professional purposes only and are located at my work site. (Education Code 32425,39805,35160)

Advisor: _____

Print, Date, & Sign

** APPROVAL **

Payments WILL NOT BE MADE without proper authorizing signatures below:

ASB Student Representative: _____

Print, Date, & Sign

ASB Treasurer: _____

Print, Date, & Sign

ASB Advisor: _____

Print, Date, & Sign

School Principal: Rhett Carter

Print, Date, & Sign

For OAHS Business Office Use Only:

Check #: _____

Amount: _____

Processed By: Lauren Whitham

Date: _____

Check Given to Advisor: _____

Date: _____