

**American Legion Auxiliary**

**Department of Oklahoma**

**Insert Unit Name & Number**

**Insert Address**

**Fund Raiser Start Up Money Receipt Form**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Check # :** | | | | | |
| **Name of Event** | | | | | |
| **Amount Provided: $** | | | | **Date** | |
| **Notes** | | | | | |
|  | | | |  | |
| **ALA Unit 60 Treasurer** | | |  | **Received by Event Chair Person** | |
| **Start-up Fund Raiser Cash Amount Returned: $** | | |  | **Date:** | |
| **Fund Raiser Event Amount Earned: $** | | |  |  | |
| **Total Amount Received: $** | | |  |  | |
| **Event Chair Person:** | | |  |  | |
| **ALA Unit 60 Treasurer:** | | |  |  | |
| **EVENT BREAKDOWN:** | | | | | |
|  | **# Of Veterans Free:** |  |  | **Amt from Raffles:** | **$** |
|  | **Cash Amt:** | **$** | **Silent Auction:** | **$** |
|  | **Amt from Checks:** | **$** | **Amt. from Pre-sold Tickets:** | **$** |
|  | **Donation Amt:** | **$** | **Other:** | **$** |
| **Notes:** | | | | | |