

**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:** |