	as a source of fundraising or hosted ar	VIOU	er Surrender Inc. nding the Fight Against ALS	
Your Name: Event name and date(s):				
SNOWFLAKES/ FISH SALES/ COLLEC				
Snowflake /	Fish Sales \$			
Collection boxes \$		Did I return the box after the event? Yes or No		
OTHER INCOME Other Income (silent auction, garag bake sale, pasta dinner, etc.):	;e sale, \$	Source of Income		
TOTAL SALES	\$	Thank you for taking the time to provide complete information. **Please complete the raffle ticket sales form(s) separately. Please use the appropriate form for the raffle tickets.		
Participant Distribution				
INDIVIDUAL PARTICIPANT CREDIT EARNED		FOR OFFICE US	E ONLY	
Category/Name: money Box/Susan	n Smith <u>credit \$ 210 (EXAMPLE)</u>			
Category/Name:	credit \$	Amt returned: \$_	Bntry Date Who	
Category/Name:	credit \$	Amt returned: \$_	Bntry Date Who	
Category/Name:	credit \$	Amt returned: \$	Entry Date Who	

Category/Name: money Box/Susan Smith	credit \$ 210 (EXAMPLE)	
Category/Name:	credit \$	

FOR OFFICE USE ONLY		
Amt returned: \$	Entry Date	Wno
Amt returned: \$	Entry Date	Who
Amt returned: \$	Entry Date	Who
Amt returned: \$	Entry Date	Who
Amt returned: \$	Entry Date	Who
Amt returned: \$	Entry Date	Who
Amt returned: \$	Entry Date	Who

Total income submitted \$	Less Expenses \$	\$