

**[Church Name]**  
**Fundraising Accounting Form**

Name of Event: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Organizing Group/Ministry: \_\_\_\_\_

Estimated # of Participants/Attendees: \_\_\_\_\_

Event Leader/Contact Information: \_\_\_\_\_

Number of Event Volunteers: \_\_\_\_\_

\_\_\_\_\_

Estimated # of Volunteer Hours: \_\_\_\_\_

**INCOME** Details (e.g. ticket sales, food, silent auction, etc.):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TOTAL INCOME:** \_\_\_\_\_

**Estimated Value of Any Non-Cash Donations** (Please detail # of items, quantity):

*(Please do not add this estimate to Total Income.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EXPENSE** Details (e.g. food, equipment rental, supplies, postage, etc.):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TOTAL EXPENSES:** \_\_\_\_\_

**NET EVENT PROCEEDS (Income – Expenses):**

\_\_\_\_\_

Form completed by: \_\_\_\_\_

Date: \_\_\_\_\_