



RITCHIE COUNTY HIGH SCHOOL

"Where It's All About Learning"

RCHS ATHLETICS PROFIT/LOSS FORM

NAME OF APPROVED FUNDRAISER: _____

EXPENDITURES PO # _____ CHECK # _____

MONEY RECEIVED = _____

EXPENDITURES = _____

TOTAL PROFIT = _____

FUNDRAISER SUPERVISOR SIGNATURE: _____

DATE: _____

ADMINISTRATOR SIGNATURE: _____

DATE: _____