## Donation Tracking Form

This form is required for internal processing procedures required by the IRS. Take a picture by phone and send it to info@autismakron.org. Attach a copy to submit with the deposit.

Record cash or checks from each activity that receives revenue from your event. For example: if you are including a 50/50 raffle specify "Cash from 50/50." See below for other examples. Omit activities that are NOT part of your fundraising event.

Cash from ticket sales


## Cash

| Denomination | Number | Extension |
| :--- | :--- | :--- |
| $\$ 20$ |  | $\$ 0$ |
| $\$ 10$ |  | $\$ 0$ |
| $\$ 5$ |  | $\$ 0$ |
| $\$ 1$ |  | $\$ 0$ |
| Change |  |  |
|  | Total | $\$$ |

## Checks

Cash

| Denomination | Number | Extension |
| :--- | :--- | :--- |
| $\$ 20$ |  | $\$ 0$ |
| $\$ 10$ |  | $\$ 0$ |
| $\$ 5$ | $\$ 0$ |  |
| $\$ 1$ |  | $\$ 0$ |

Change
Total \$ -

Checks

> \# of checks Total

Total Cash to Deposit

Total Checks to Deposit

Total Deposit
\$ -

| Prepared by: | Date: |
| :--- | :--- |
| Prepared by: | Date: |

Deposit taken by:
Date:

Name of Fundraising Event:

