



## 50/50 Collection Report

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

Charity Promoted *(if stipulated)*: \_\_\_\_\_

NET Funds to Collected: \$ \_\_\_\_\_

Funds submitted by: \_\_\_\_\_

Funds Submitted Date: \_\_\_\_\_

Treasurer Confirmed Receipt: \_\_\_\_\_ Date: \_\_\_\_\_

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