

**Clarke University
Raffle Financial Report**

This form must be completed and filed with the Controller's office **within 7 days of the completion of the raffle.** You may complete this form and turn it in at the Student Accounts Office when depositing the raffle proceeds.

Date _____

Name of Organization/Department _____

Account number (if applicable) for deposit _____

Date first ticket sold _____

Date last ticket sold _____

Date of raffle drawing _____

Number of tickets sold _____

Ticket price (i.e. \$1/ticket, 6 for \$5, etc) _____

Gross Raffle Proceeds \$ _____ *

Less: Cost of prize/prizes paid \$ _____

Net Raffle Proceeds \$ _____

Please attach a list of all raffle winners (including name, address and prize won).

* The University is required to pay Iowa state sales tax on all raffle receipts. The amount of state sales tax will be deducted from the Gross Raffle Proceeds by the Controller.

Name of person completing this report

Phone number

Signature of person completing this report

For Business Office Use: Amount of Sales Tax: _____
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