

ADENA LOCAL SCHOOL DISTRICT
Sales Potential Form

Organization: _____

Proposed Sales Project: _____

Vendor: _____

Company & Address _____

Representative: _____

Quantity to be ordered: _____ Cost per unit: _____

Proposed Sale Price/Unit: _____

Requested By _____ Date _____

Approved By - Building Principal _____ Date _____

Approved By - Athletic Director _____ Date _____

COMPLETE BOTTOM AFTER PROJECT IS COMPLETED

Purchased: _____ @ Price/Unit: _____ = Total Cost \$ _____

Purchased: _____ @ Price/Unit: _____ = Total Cost \$ _____

Purchased: _____ @ Price/Unit: _____ = Total Cost \$ _____

LESS:
Returns _____ \$ _____ \$ _____

TOTAL _____ \$ _____ \$ _____

Total Deposited with Treasurer: _____ \$ _____

Quantity Unaccounted For: _____ \$ _____
(Explain on Back)

Sponsor's Signature _____ Building Principal's Signature _____

Date _____ Date _____

RECEIPT NUMBERAMOUNT DEPOSITED[illegible]

\$ _____

Sponsors Signature