FUNDRAISER PARTICIPANT: FILL OUT ONE ROW FOR EACH OF YOUR CUSTOMERS. SUBMIT THIS FORM TO YOUR FUNDRAISER ORGANIZER BY THE ORDER DEADLINE.

FUNDRAISER PARTICIPANT'S SUMMARY

NAME _____ ORGANIZATION _____

			# OF HANGING BASKETS				# OF VEGGIE POTS			# OF MARKET PACKS		# OF FLOWER GARDENS		PAYMENT COLLECTED ($)
DATE	SOLD TO	PHONE #	MIXED	STRAW-BERRY	TOMATO	TOTAL	PEPPER	TOMATO	TOTAL	HERB	TOTAL	MIXED	TOTAL	(TOTAL FROM CUSTOMER ORDER FORM)
TOTAL OF EACH ITEM														