

**REPORT OF SHRINE CLUBS**  
Supplementary Fundraising Report  
Year Ended December 31, 2023

Name of Club: \_\_\_\_\_

Federal EIN: \_\_\_\_\_

**CHARITABLE FUNDRAISING**

1. Gross Revenues: \$ \_\_\_\_\_

2. Gross Expenditures: \$ \_\_\_\_\_

NET PROCEEDS: \$ \_\_\_\_\_

3. Amount to Shriners Hospitals\* \$ \_\_\_\_\_

4. Amount Retained for Transportation Fund\*\* \$ \_\_\_\_\_

\* Must equal NET PROCEEDS (Line 1-2) unless an amount was approved for transportation

\*\* Requires prior approval by Potentate & Recorder.

**FRATERNAL FUNDRAISING**

5. Gross Revenues: \$ \_\_\_\_\_

6. Gross Expenditures: \$ \_\_\_\_\_

7. NET PROCEEDS Transferred to Your  
General Fund \$ \_\_\_\_\_

(Equals Net of Line 5 minus Line 6 and must  
be included in **LINE F** of your primary report spreadsheet)

Prepared By: \_\_\_\_\_ Title: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_