***** Once money is collected, please sign and close this envelope *****

Hair Massacure Pledge Balance Sheet

Thank you for helping to support:

MAKE-A-WISH Northern Alberta Canada

STOLLERY CHILDREN'S HOSPITAL FOUNDATION

For information:

Go to www.hairmassacure.com or call (780) 444-9467

Step 1: Participant's Name _____

School or Group _____

Package prepared by _____

Step 2: Check that all names and addresses on pledge sheets are complete and legible.

PLEDGE INFO

Step 3: # of pledge sheets _____

Step 4: pledge amount by sheet

sheet #1 $ _____

sheet #2 $ _____

sheet #3 $ _____

sheet #4 $ _____

Step 5: **Total Pledges *_LINE A_*** $ _____

(total will be used later)

FUNDS COLLECTED

Step 6: # of cheques _____

Step 7: **Cheques Total *_LINE B_*** $ _____

Step 8: **Cash Total *_LINE C_*** $ _____

Step 9: **Online Total *_LINE D_*** $ _____

Step 9: **Total Collected *_LINE E_*** $ _____

(add lines B, C and D)

cash/coin

_____	X	$50	=	$ _____
_____	X	$20	=	$ _____
_____	X	$10	=	$ _____
_____	X	$5	=	$ _____
_____	X	$2	=	$ _____
_____	X	$1	=	$ _____
_____	X	$0.25	=	$ _____
_____	X	$0.10	=	$ _____
_____	X	$0.05	=	$ _____
_____	X	$0.01	=	$ _____

(enter total on LINE C) $ _____

BALANCING

Take totals from above:

Step 10:

Total Pledges	***LINE A***	$ _____
Total Online Pledges	***LINE D***	$ _____
Total Collected	***LINE E***	$ _____
****NOTE****	***LINE F***	$ _____ (Line A + D - E = F)

**If LINE F does not give a ZERO BALANACE one or more sponsors still owe money. Please check each pledge sheet to determine who is still owing and try to collect it before the event. If this is not possible, make a note at right of who is still owing and what amount they owe.

NOTES

use this section for any notes you may need to include

_____

_____

_____

_____

_____

_____

Total Amount Enclosed: $ _____

Signature: _____

Date: _____

☐ All of my pledge money has been collected and is enclosed

FOR OFFICE USE ONLY

Balances: YES NO

Balanced by: _____