



Booster Club-or PTA-Managed Camps, Classes, Clinics, and Leagues Financial Statement

This financial statement is to be submitted to the Community Use Section within four weeks of the completion of the session. Failure to do so may result in loss of facility use for the next camp, clinic, or league submitted for approval.

(Activity)	(Location)	(Inclusive Dates for Session)
(PTA, or Booster Club)		Session _____ of _____ Sessions(s)

INCOME

Number of Participants	Fees per Session	Total
_____ x	_____ =	\$ _____
_____ x	_____ =	_____
_____ x	_____ =	_____
	Subtotal	\$ _____
	Less Refunds	\$ _____
	Total Income	\$ _____

EXPENDITURES

Personnel	Other
Name	Title
Amount	Amount
\$ _____	Equipment (attach list) \$ _____
	Supplies _____
	Printing _____
	Awards _____
	Postage _____
	Custodial Services _____
	Insurance _____
	Other (please specify) _____
Counselors \$ _____	
Guest Lecturer(s) \$ _____	
Total Personnel Expenses \$ _____	Total Other Expenses \$ _____
	Total Expenses \$ _____
	Income \$ _____
	Profit \$ _____

Sent to Financial Services:
Check# _____ **Date** _____
 (attach copy of check and FS-133)

I certify that, to the best of my knowledge, the above is a true and accurate accounting for the activity. All obligations have been satisfied.

Name _____ Signature _____
 (PTA or Booster Representative—please print)

Phone _____ Date _____ E-Mail _____