



Chartiers Valley Band Boosters

EVENT CHAIRPERSON'S REPORT TO THE TREASURERS
FORM IS DUE TO TREASURER(S) WITHIN (7) DAYS OF EVENT COMPLETION

Event: _____ Event Date(s): _____

Chairperson(s): _____ Phone: _____

Income: (details from page 2)

Total Cash Received: _____

Total Checks Received: _____

Total Income: _____

Expenses: (details from page 2)

Item Description	Amount	Paid/Pending
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total Expenses: _____

Net Profit: _____

Number of Students Participating: _____

Money Credited to Students Accounts: _____

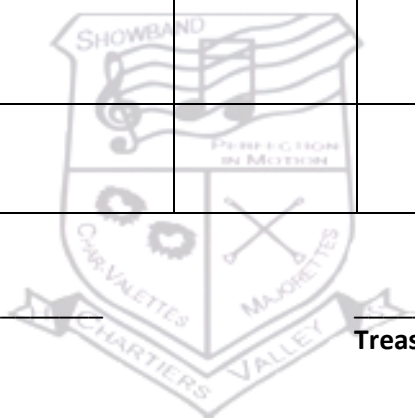
Money Credited to General Fund: _____

Profit Per Unit: _____
(if possible)

Example: Hoagies
50 Students @ \$2.15
10 Students @ \$1.15

Chairperson Signature(s) : _____

Date:	Expense/Item Description	Amount	Receipt Attached	CVBB Check #	CVBB Treasurer Initials



Chairperson(s) Signature(s)

Treasurer(s) Signature(s)

PARENT NAME	FUNCTION/TASK PERFORMED	POINTS	VP SIGNATURE – POINTS ASSIGNED

FIRST VP SIGNATURE