

PMTA-WC EVENT CHAIR FINAL REPORT

EVENT _____

DATE _____

CHAIR _____

Number of teachers participating _____

INCOME

TOTAL \$ _____

of entrants _____

Fees collected _____

EXPENSES

TOTAL \$ _____

(fill in all that apply – please be specific)

Per Student Charge (DS/Eval) _____

Copies _____

Postage _____

Envelopes/Labels _____

Cash Prizes _____

Ribbons/Gifts/Plaques _____

Judges Fees _____

Food _____

Other (please be specific) _____

PROFIT OR LOSS

TOTAL \$ _____

Please make 4 copies of this form. Keep 1 copy for your files and attach all receipts to the treasurer's copy. Others go to president and secretary.