

# SUMMARY OF INCOME AND EXPENSES

Name of Private Organization: \_\_\_\_\_

Period of Time Covered:

Date - Date

POC Name:

Bank Account Name:

Bank Account Number:

## Summary:

Beginning Balance	\$ -
Deposits	\$ -
Total Funds	\$ -
Disbursements	\$ -
Ending Balance	\$ -

## Income:

Membership Dues	\$ -
Fundraisers	\$ -
Donations	\$ -
Sales	\$ -

## Total Income:

\$ -
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## Expenses:

Administrative:	\$ -
- Supplies	\$ -
- Telephone/Internet	\$ -
- Insurance	\$ -
- Equipment	\$ -
- Prizes	\$ -
- Food	\$ -
Contributions/Donations:	
- Scholarships	
- Schools Donations	
- Instruction/Coaches	
- Athletic Organizations	
- Military Organizations	
- Scouting Organizations	

## Total Expenses:

\$ -
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## Remaining Balance:

\$ -
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Auditor: Name and  
Signature

Auditor: Name and  
Signature

Auditor: Name  
and Signature

PO President: Name  
and Signature