

EVENT TALLY FORM

Source of Funds:

Amount:

Ticket Sales: _____

Donations: _____

Raffle: _____

Other Sales: _____

Misc. Income: _____

Describe income: _____

Sub Total: _____

Expenses: (_____)

Describe expenses: _____

Net Total: _____

Counter One: _____

SIGNATURE

Counter Two: _____

SIGNATURE

Date: _____