

Committee Income Report

(To be completed and returned to the Treasurer)

Committee Name _____

Sub-Committee Name _____

Income Itemization (List each source of income)

Source	Checks	Cash	Total
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____	\$ _____

Comments: _____

Name of Committee Chair (print)

Signature of Committee Chair

Date

Signature of Treasurer

Date