**CVMC Income\Expense Report**

\*Please submit one (1) form per check

|  |  |
| --- | --- |
| **Name**: |  |
| **Date:** |  |
| **Email:** |  |
| **Payee’s Name (name on check):** |  |
| **Payee’s Address (if applicable):** |  |
| **Payee’s Phone Number:** |  |

**Income\Expense Detail:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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|  |  |  |
| --- | --- | --- |
| **Income** | **Expense** | **Category** |
| 100 | 600 | Events-Non-Show |
| 110 | 610 | Holiday Party |
| 120 | 620 | Membership |
| 130 | 630 | Merchandise |
| 140 | 640 | Show-Fall |
| 150 | 650 | Show-Spring |
| 160 | 660 | Flowers, Get Well Etc |
|  | 670 | Parades |
| 180 | 700 | Bank Fees |
|   | 710 | Board Discretionary |
|   | 720 | Picnic |
|   | 740 | Insurance |
|   | 750 | Meetings |
|   | 760 | Newsletter |
|   | 770 | PO Box |
|   | 790 | SCC Registration |
|   | 800 | Supplies, Business Cards |
| 190 | 810 | Trailer |
|   | 820 | Miscellaneous |

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| --- | --- | --- | --- | --- |
|  | **Description** | **Amount** | **Category** | **Income****Source** |
| Item 1: |  |  |  |  |
| Item 2: |  |  |  |  |
| Item 3: |  |  |  |  |
| Item 4: |  |  |  |  |
| Item 5: |  |   |   |  |
| Item 6: |   |   |   |  |
| Item 7: |   |   |   |  |
| Item 8: |   |   |   |  |
| Item 9: |   |   |   |  |
| **TOTAL** |   |   |   |  |

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**Office Use Only: -----------------------------------------------------------------------------------------------------------------------------------**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Check Number:** |  |  | **Income Total By Category**: | # | $ |
| **Date:** |  |  |  | # | $ |
| **Amount:** | $ |  |  | # | $ |

**Notes**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_