

# Arkansas School Band and Orchestra Association

## Financial Report Hosts of All-Region Clinic Auditions

Region \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_ Concert Band  
 \_\_\_\_ Orchestra  
 \_\_\_\_ Jazz Band

\_\_\_\_ Senior High  
 \_\_\_\_ Junior High

<b>RECEIPTS</b>			
	<u>Number of Students</u>	<u>@</u>	<u>Amount</u>
Concert Band			\$
Orchestra			\$
Jazz Band			\$
Late Fees			\$
Contributions			\$
<b>TOTAL RECEIPTS</b>			\$
<b>EXPENSES</b>			
Portion to ASBOA Office – Number of Students Registered _____ @		<b>(\$ .50)</b>	\$
Mailing			\$
Telephone			\$
Custodial			\$
**Security			\$
Supplies			\$
Other – Must attach itemized list.			\$
<b>TOTAL EXPENSES</b>			\$
*This balance is to be available to the Region Clinic Host for expenses.			
<b>*BALANCE</b>			\$

**(Must attach receipts for all expenses over \$10.00)**

\_\_\_\_\_  
Host

\_\_\_\_\_  
Region Chairman or Secretary/Treasurer

<p><b>Immediately following the event, a copy of this report including:</b></p> <ul style="list-style-type: none"> <li>1 – LIST of participating schools</li> <li>2 – <b>WITH</b> number registered</li> <li>3 – <b>AND</b> amount paid</li> <li>4 – <b>WITH</b> appropriate receipts</li> <li>5 – In addition please send the \$0.50 per student registered for auditions to the ASBOA Office.</li> </ul>	<p>Should be sent to:</p> <ul style="list-style-type: none"> <li>1 – Your Region Chair &amp;</li> <li>2 – ASBOA</li> <li>PO Box 2024</li> <li>Russellville, AR 72811</li> <li>Or – FAX: 479-498-6063</li> </ul>
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\*\*Fees for school security are allowable expenses for ASBOA events if required by school administration. A signed receipt for such services must accompany the financial report.

**\*\*\*When paperwork and/or funds are not received 30 days after the event, the building administrator of the director(s) responsible will be notified.**