Income/Expense Statement

_	1, 2	200	through	31, 200
Employer Identification Nu	ımber			
Name of CDSS Group Affili	iate			
Mailing address				
(Street address, if above is	PO Box)			
INCOME				
Programs	\$	_		
Fundraising	\$			
Other	\$		(specify)	
TOTAL INCOME	\$	_		
EXPENSES Facility rental	\$			
Program staff	\$		(caller, band, p	performer; include travel, if any)
Publicity	\$			
Equipment purchase depreciation rental	\$ \$ \$	<u> </u>	(non-capitalize (attach schedu	
Refreshments	\$			
Administrative staff	\$			
Office supplies	\$		(expens	es, excluding labor and equipment)
Insurance	\$			
Miscellaneous	\$		(specify)	
TOTAL EXPENSES	\$		_	
NET PROFIT (or LOSS)	\$		(Remember to	write this amount on the Balance Sheet

Income and expenses may be broken down into such activities such as Weekend Events, Festivals, Regular Series, etc. These may be broken down further into specific events or locations, i.e. Tuesday Contras at the Y, Save the Whales Dawn Dance, Carry a Big Stick Morris Ale, etc.

Balance Sheet

_	1, 200	_ through 31, 200
ASSETS Cash	\$	(cash on hand and in bank)
Equipment	\$	(capitalized)
Receivables	\$	(money owed to the group, but not yet received)
Other assets	\$	(specify)
TOTAL ASSETS	\$	
LIABILITIES Payables	\$	(unpaid bills)
Other liabilities	\$	(such as outstanding loans; specify)
TOTAL LIABILITIES	\$	
GENERAL FUND Net balance from last year	. \$	
Net profit/loss from this ye Statement)	ear \$	(from Net Profit/Loss line on Income/Expense
TOTAL GENERAL FUN LIABILITIES BALANCI		
(General Fund balance and if not, something is wrong	d Liabilities should	equal Assets;
Signature		
Title		Date