

**Music Teachers Association of California  
Stanislaus County Branch**

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**Committee Chair Event Report Form**

Please complete this form and return (no later than two weeks after the event or activity) to the treasurer.

Checks or monies received for this event go to the Financial Secretary.

Attach receipts to the "Expense Reimbursement Form" and give to Treasurer for reimbursement.

Please enclose an event program with this form, if applicable, and retain a copy of this report for your personal records.

**Event Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**Receipts**

Entry fees     \$ \_\_\_\_\_  
Donations     \$ \_\_\_\_\_  
Other           \$ \_\_\_\_\_

Total Income             \$ \_\_\_\_\_

**Disbursements**

Judging Fee    \$ \_\_\_\_\_  
Hospitality     \$ \_\_\_\_\_  
Miscellaneous \$ \_\_\_\_\_  
Postage         \$ \_\_\_\_\_  
Printing         \$ \_\_\_\_\_  
Site Rental     \$ \_\_\_\_\_  
Technician     \$ \_\_\_\_\_  
Telephone      \$ \_\_\_\_\_  
Other            \$ \_\_\_\_\_

Total Expense            \$ \_\_\_\_\_

**Profit/Loss             \$ \_\_\_\_\_**

**Summary and Comments:** (Include suggestions for improvement)