

Heartland District of the UUA
Event Report Form

07/23/2010

EVENT: _____ DATE: _____
 COORDINATOR(S): _____
 REGISTRAR: _____ REGISTRAR EMAIL: _____

ATTENDANCE	Youth	Adults	Staff	Total Attendees
# of Attendees				
# of Scholarships				
# of paid registrations				
Registration fee	\$			

ONSITE INCOME	Checks	Cash	Totals	Total Onsite Income
Registration fees	\$	\$	\$	\$
Sales (t-shirts, etc)	\$	\$	\$	\$

VOLUNTEER EXPENSES	Supplies	Food	Misc	Total Volunteer Expenses
	\$	\$	\$	\$
NET INCOME (income less expenses)				\$

GUIDELINES: This report, along with the following guidelines, are provided not only as a means to assist the coordinators of this event, but also to help the District Office maintain accurate records. Accurate records allows us to do a better job of budgeting for future conferences and workshops. Please use the following guidelines as a checklist when handling district funds and submitting your report. **THANK YOU.**

CHECKLIST:

_____ **ALL INCOME MUST BE TURNED INTO THE DISTRICT OFFICE WITHIN TWO WEEKS OF THE CLOSE OF THE EVENT.**

_____ Cash from registration fees and/or sales has been converted to a check before submitting to District Office.

_____ Cash payments made from advance funds have been recorded as expenses and accompanied by receipts.

_____ Remaining advance funds, if any, have been returned along with other registration and sales income.

_____ **ALL EXPENSES MUST HAVE CORRESPONDING RECEIPTS.**

_____ Expenses incurred by committee members and staff is submitted to the District office on standard Expense Reimbursement Form along with ALL expense receipts. Expense reimbursements are typically paid within two weeks of receipt of the request.

_____ **All expense reimbursement requests have been approved by the committee chair** either by signing the expense reimbursement form, or by sending approval by email to the District office at office@heartlanduu.org. Committee chair expense reimbursement requests must be approved by the District Executive.

_____ **RETURN ALL REGISTRATION FORMS & FEES FOR THIS EVENT TO THE DISTRICT OFFICE WITH THIS REPORT.**

Submitted by: _____ Date: _____