CHAPTER MONTH OF ABATE TREASURER'S REPORT CHAPTER NO. SUBMITTED BY ACCOUNT NAME DISTRICT NO. DATE: ACCOUNT NUMBER INCOME RECEIVED FOR: BEGINNING BALANCE 0 DATE DESCRIPTION FOR MISCELLANEOUS MEMBERSHIP STATE STATE STATE **PRODUCTS** CHARITY CHAPTER CHAPTER CHAPTER TOTAL DEPOSITEI MISC. & OTHER TO STATE INCOME RALLY SEMINAR RAFFLE INCOME OFFICE INCOME FUNDRAISER 0 0 0 0 0 0 0 0 0 0 0 0 INCOME TOTALS 0 0 0 0 0 0 0 0 0 0 **EXPENSES** PAID FOR: DATE DESCRIPTI CK. # MISCELLANEOUS MEMBERSHIP STATE STATE STATE **PRODUCTS** CHARITY CHAPTER CHAPTER CHAPTER TOTAL TO STATE TO STATE RALLY SEMINAR RAFFLE TO STATE OFFICE EXPENSES FUNDRAISER 0 0 0 0 0 0 0 0 0 0 0 0 EXPENSE TOTALS 0 0 0 0 0 0 0 ENDING BALANCE

BREAKDOWN

POSTAGE & SHIPPING

PRINTING

TRAVEL

OTHER

NOTES:

OFFICE EXPENSE

FUNDRAISER

BREAKDOWN FOR OFFICE INCOME

INTEREST INCOME

OTHER

ADVERTISING INCOME