

ALEXANDRIA CENTRAL SCHOOL PROFIT AND LOSS STATEMENT

Class/Club Name: _____

Activity: _____ Activity Date (s): _____

Subject to NYS Sales Tax YES NO (Circle One)

Admissions: Total: Sale Price: Total:

RECEIPTS:

Date of Sale	Description of Sale Item(s)	<u>OR</u>	#Admitted	#Sold	Per Item	Receipts
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_____	_____		_____	_____	_____	_____
_____	_____		_____	_____	_____	_____
_____	_____		_____	_____	_____	_____
_____	_____		_____	_____	_____	_____
_____	_____		_____	_____	_____	_____
_____	_____		_____	_____	_____	_____

Anticipated Receipts	\$ _____	Total Actual Receipts	\$ _____
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DISBURSEMENTS:

Date	Payee	Check#	Purpose	Amount
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Anticipated Disbursements	\$ _____	Total Actual Disbursements	\$ _____
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Signature of Student Treasurer

Signature of Advisor

Date