



REGION XIX

Association of California School Administrators – Riverside County

Charter Financial Statement for Fiscal Year _____
(Year)

Charter _____ Date _____

Please use this form

INCOME

Beginning Balance from previous year	_____
Charter Dues	_____
Allotment from Region	_____
Surplus Rebate from Region	_____
Workshop/Meetings	_____
Other Income (specify)	_____
TOTAL INCOME	\$ _____

EXPENDITURES

Meeting Expenses not included below	_____
Meals	_____
Supplies/Office	_____
Duplication/Printing	_____
Postage	_____
Scholarships	_____
Workshops or Conference Expenses	_____
Lodging	_____
Donations	_____
Bank Fees	_____
Other (List): 1	_____
2	_____
3	_____
4	_____
Contingency Reserve	_____
TOTAL EXPENDITURES including Reserve	\$ _____

SUMMARY

Total Income	\$ _____
Less Total Expenditures	\$ _____
ENDING BALANCE	\$ _____

I hereby certify that the above is true and correct:

Charter Treasurer

Phone #

Contact Address

Signature

Date