

ALAO Activity Proposed/Actual Expense Report *

Date: _____

Submitted by: _____

Name of Program or Project: _____

Date/Location: _____

ALAO Account Prefix: _____

EXPENSES

Itemize multiple expenses in each category on separate sheet of paper if necessary

INCOME

Itemize multiple expenses in each category on separate sheet of paper if necessary

| | | Proposed | Actual | | | Proposed | Actual |
|------------------------|-----|-----------------|---------------|---------------------------------------|-----|-----------------|---------------|
| Printing/Copying | xn | _____ | _____ | Donations | ib | _____ | _____ |
| ALAO Labels | xd | _____ | _____ | Grants | ib | _____ | _____ |
| Postage | xp | _____ | _____ | Registrations | ie | _____ | _____ |
| Telephone | xh | _____ | _____ | Cancellation Fee | ioh | _____ | _____ |
| Facilities/Group Meals | xl | _____ | _____ | Other (Please specify) | | _____ | _____ |
| Equipment Rental | xel | _____ | _____ | | | | |
| Supplies | xd | _____ | _____ | Total Income: | | _____ | |
| Speaker Expenses | xc | _____ | _____ | For programs, please indicate: | | | |
| Honoraria | xk | _____ | _____ | # of participants | | _____ | _____ |
| Refund | xrf | _____ | _____ | Registration Fee | | _____ | _____ |
| Other (Please specify) | | _____ | _____ | Non-Member Fees (total) | ia | _____ | _____ |
| | | _____ | _____ | # of new ALAO mbrs | | _____ | _____ |
| TOTAL EXPENSES | | _____ | _____ | | | | |

Net Expense or Income _____
(circle one)

*Distribution of this form:
When getting initial program approval, send copy of Proposed Expense Report to the Program Committee Chair. Once program is approved, send copy of Proposed Expense Report to Treasurer. After program, send copies of Actual Expense Report to Program Committee Chair, Treasurer, and OCA representative. Attach receipts and invoices to OCA representative copy.