

**TRIANGLE SPORTSMEN'S CLUB
COMPETITION REPORT**

COMPETITION: _____

DATE : _____

INCOME STATEMENT

EXPENSE STATEMENT

REGISTRATION FEE: \$ _____

Number of Competitors : _____

TOTAL REGISTRATION INCOME:\$ _____

OTHER MATCH INCOME:

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

TOTAL \$ _____

TOTAL MATCH INCOME \$ _____

PROFIT & LOSS STATEMENT

INCOME : \$ _____

EXPENSES : \$ _____

NET PROFIT (LOSS) : \$ _____

TOTAL AMOUNT TURNED INTO CLUB : \$ _____

REPORTED BY : _____

RECEIVED BY : _____

MATCH EXPENSES : AMOUNT

Postage _____

Copies _____

Points Awards NRA _____

_____	_____
_____	_____
_____	_____
_____	_____

CASH AWARDS:

_____	_____
_____	_____
_____	_____

**OTHER MATCH EXPENSES :
(TARGETS, PROP MATERIAL, ETC)**

_____	_____
_____	_____
_____	_____

FUNDS PAID OUT TO VENDORS:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

TOTAL MATCH EXPENSES _____
(RECEIPTS MUST BE ATTACHED)

DATE : _____

DATE : _____

1 COPY TO TREASURER AND 1 COPY TO THE SECRETARY