



Make Friends. Make Quilts. Make a Difference.

## INCOME AND EXPENSE REPORT FORM

Name:		Date:	
Phone:			
Email Address:			

### Itemized Amounts:

#### INCOME

Description	Amount
Donations	
Garage Sale	
KCRQF	
Membership	
Opportunity Quilt Tickets	
Other Income	
Quilt Show Admission	
Quilt Show Boutique	
Quilt Show Raffles	
Quilt Show Silent Auction	
Quilt Show Vendor Rent	
T-shirt Sales	
Workshop Fees	
Other Income	

#### EXPENSE

Description	Amount
Awards & Prizes	
Beginners' Class	
Community Service	
Charity & Disaster Quilts	
Kids' Camp	
Membership	
Opportunity Quilt Supplies	
Printing	
Quilt Show Labor	
Quilt Show Rental	
Supplies/Equipment	
T-shirts	
Workshops/Programs	
Other Expense	

<b>Total Amount</b>		<b>Total Amount</b>	
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If Other, please explain \_\_\_\_\_

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Treasurer Input:	Date Deposited	Date Received	Date Paid
Initials:	Amount	Check #	Check Amt

# MIAMI COUNTY QUILTERS GUILD

### ITEMIZED PAYMENT LIST

*Instructions: List name, check number or check mark for cash.*

Annotate the amount for each category. Bring total to the front

NAME	CHECK #.	CASH	MEMBERSHIP	OPP TICKETS	OTHER
TOTAL					