

AVCSD Recreation Past Event/Trip Report Form

Report must be submitted to the AVCSD General Manager within 4 working days after event completion.

Event or Trip Name: \_\_\_\_\_

Date(s) of Event/Trip: \_\_\_\_\_

Name of Report Preparer: \_\_\_\_\_

Date Prepared/Submitted \_\_\_\_\_

1. Report actual income and expenditures:

**INCOME**

**EXPENDITURES**

fees \_\_\_\_\_

Instructor fee \_\_\_\_\_

transportation \_\_\_\_\_

donations \_\_\_\_\_

Fingerprints \_\_\_\_\_

Parking/Tolls \_\_\_\_\_

other \_\_\_\_\_

Supplies/Equip \_\_\_\_\_

Lodging \_\_\_\_\_

Scholarships \_\_\_\_\_

Food \_\_\_\_\_

Facility Rental Fee \_\_\_\_\_

Volunteer Stipend \_\_\_\_\_

Admission Fees \_\_\_\_\_

Other \_\_\_\_\_

TOTAL Income: \_\_\_\_\_

TOTAL Expenditures: \_\_\_\_\_

2. If school transportation was used: actual milage \_\_\_\_\_ rate/mi \_\_\_\_\_

3. Did the finances work? If the event exceeded the budget, please explain where the extra funds came from:

4. Please list any outstanding debts to be paid or fees to be collected as of today:

5. Was cash used and accounted for? \_\_\_\_\_

6. Did everything happen on schedule? If no, please explain: \_\_\_\_\_

7. Were there any problems? If so, please explain: \_\_\_\_\_

8. Would you like to see this event or trip repeated? What would you do the same or differently?

9. Any additional comments on this event/trip: \_\_\_\_\_

Please return this form to [districtmgr.avcsd@gmail.com](mailto:districtmgr.avcsd@gmail.com) or fax to (707) 895-2239

All information is for public use and will be presented at the next meeting of the CSD Board of Directors