## LEISURE VALLEY RANCH ACTIVITY INCOME & EXPENSES

Date:				
ACTIVITY or AREA	l:			
SOURCE	INC	COME	en lii da a ali ann da mada a mada a liid dhii dha mada a liid dhii dha a ann a	AMOUNT
		TOTAL IN	 СОМЕ	
PAID TO	EXPENS	E	AMOUNT	Signature
				received for expense.
<u>Please attach all rece</u>	<u>eipts</u>	TOTAL PAID OU	TT	
	INCOME	LESS EXPENSES		S
				Net Profit
Requires 2 signature – u Completed by:	inrelated individuals	_		
Reimbursement to:	(Signature)			
AMOUNT:	CHECK:	CA	ISH:	

Make 2 copies of this form. One goes to Activity Directors and one for your records.