

Olympia Chapter – Washington State Music Teachers Association

Event Budget Worksheet

For office use only

Check # _____

Date _____

Instructions:

1. This form is to be completed by the event chair.
2. Mail Expense Report and Reimbursement Request within 5 days of event to:

Amy Yang
Treasurer, OMTA
4931 Siskiyou Loop SE
Olympia, WA 98501

Event Description (workshop, student recital, festival, competition, etc. Include date and venue):

INCOME	AMOUNT
Grants, donations (describe _____)	_____
Registration/ticket fees _____ # of units x _____ rate =	_____
Other income (describe _____)	_____

IN-KIND DONATIONS (list value of any expenses donated to project):

TOTAL INCOME _____

EXPENSES

Supplies _____

Postage/Shipping _____

Printing and Reproduction _____

Travel

Auto miles x rate _____ x .45 = _____

Airfare (Carrier _____) _____

Room _____

Person(s), Date(s), Place(s) of travel: _____

Professional fee (attach W-9 Form) _____

Other (describe _____) _____

TOTAL EXPENSES

_____ Total expenses _____ Reimbursable amount

Signature of person submitting budget & date: _____

Please remind all members of your committee to include a reimbursement form with receipts.