

SEM Activity Financial Statement

Activity: _____

Date: _____

Responsible Person: _____

Target Income/Expense:

(Positive for income, negative for expected loss, 0 for breakeven events)

Income:

List all money taken in, source and give explanation (Fees, ...?)

Source:

Notes:

Source:	Notes:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total Income

Expenses:

List all money spent, to whom, for what...

For: (Attach copies of receipts)

Notes:

For: (Attach copies of receipts)	Notes:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total Expense:

Net Income/Expense:

Variation from
planned budget: