



(The) Texas ABATE Confederation, Inc
P. O. Box 416
Lake Dallas, TX 75065

Chapter: _____

Event: _____

Prepared by: _____

Date: _____

INCOME					Beginning Balance of Bank as of		
Description of Taxable Income	Date	Gate Fees	Products	Other (please list)	Total		
					\$		-
					\$		-
					\$		-
					\$		-
Total Taxable Income					\$		-

Description of NON Taxable Income	Date	Membership	Donations	Dues	50/50	Newsletter Ads	Other (please list)	Total
								\$ -
								\$ -
								\$ -
								\$ -
Total NON Taxable Income								\$ -
Total Income								\$ -

EXPENSES									
Description of Expense	Date	Check # or Cash	Membership or Donations	Products to Sell	Postage	Event Costs (flyers, Bands, Foods, etc)	Newsletter	Other (please list)	Total
									\$ -
									\$ -
									\$ -
									\$ -
									\$ -
Total Expenses									\$ -

Ending Balance	\$ -
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Please include a copy of your Bank Statement with your Financial Report and send to Terri Davison by the 10th of each month. For questions or comments, please call me at 940-597-3303 or email Jetr_spec@msn.com