



NORTH BAY MINOR HOCKEY ASSOCIATION
FINANCIAL STATEMENT (REPRESENTATIVE)

TEAM NAME: _____

TEAM OFFICIAL: _____

DATE (D/M/Y): _____

REVENUE

Player Team Fee	\$ _____
Fundraising (above \$2000)	\$ _____
Additional Sponsorship (above \$200)	\$ _____
Additional Sponsorship (below \$200)	\$ _____
Other Revenue	\$ _____
Bank Interest	\$ _____

Total Revenue _____ **0**

EXPENSES

Ice Time / Contract	\$ _____
Skill Sessions	\$ _____
Tournament Fees	\$ _____
Tournament Permits	\$ _____
Travel/Transportation/Accommodations	\$ _____
Equipment	\$ _____
Team Events	\$ _____
Fundraising buyout reimbursement	\$ _____
Team Pictures	\$ _____
Miscellaneous	\$ _____
Bank Charges	\$ _____

Total Expenses _____ **0**

BANK BALANCE _____ **0**

Please attach the following:

- Monthly Bank Statment
- Copy of ALL Receipts for Revenue & Expenses Listed

COMPLETED FORMS TO BE SUBMITTED MONTHLY TO:

NBMHA CONVENOR

OR

NBMHA Office (nbminorhockey@outlook.com)

