

SATELLITE MUSEUM TREASURER'S REPORT 2017

Name of Museum _____

Name of Company _____

Type of Museum: building, cabin, artifact collection, other _____

Museum is the responsibility of Camp _____

or Company _____

DUP [owns, leases, MOU(Memorandum of Understanding)] for building, cabin, or site

Following are suggestions of information to be included:

Beginning Balance: \$ _____

SOURCES OF REVENUE:

Assessment fee: _____

Donations: _____

Gifts received: _____

Grants received: _____

Fundraisers (list below) _____

▪ _____

▪ _____

▪ _____

Gift Shop: _____

Other: _____

Total Revenue: \$ _____

Sub-Total: \$ _____

(Beginning Balance + Revenue)

SUMMARY OF EXPENSES:

Liability Insurance: _____

Utilities [lights, heat, etc.] _____

Maintenance [snow removal, lawn, etc.] _____

Supplies: _____

Grant match: _____

Lease/Rent: _____

Miscellaneous (list below) _____

* _____

* _____

* _____

Total Expenses: \$ _____

GRAND TOTAL: \$ _____

(Sub-Total – Expenses)

BALANCE OF FUNDS IN ACCOUNTS

Checking: \$ _____

Savings \$ _____

TOTAL: \$ _____

(Should match Grand Total Amount)

Report Prepared by _____ Title _____

Company Treasurer _____

A summary of the museum's (museums' if there is more than one in the Company) will be given by the company treasurer verbally in the general meeting at district convention along with the Company Treasurer's Report. Please limit this oral report to beginning balance, total revenue, total expenses, and ending balance.

After the report is presented at the Convention, this form is to be given to the ISDUP Board Member attending your convention.