

7-5  
**WORKSHOP INCOME REPORT**

Event: \_\_\_\_\_

Location: \_\_\_\_\_

Dates: \_\_\_\_\_

Enclose this form with the checks and forward to the Treasurer.

<b>Item</b>	<b>Number</b>	<b>Fee</b>	<b>TOTAL</b>
Registration Member			
Registration Non-Member			
<b>Sub-total Reg</b>			
Meals			
Other Income			
<b>TOTAL INCOME</b>			

Comments: