



Northern Virginia Music Teachers Association
www.nvmta.org

EVENT ACTIVITY REPORT

Name of Event: _____

Date of Event: _____

INCOME:

	Current Year Budget	Current Year Actual	Proposed Budget for Next Year
Fee Income: # of participants _____ @ \$ _____ per entrant	\$	\$	\$
Other (describe)			
Other (describe)			
TOTAL INCOME	\$	\$	\$

EXPENSES:

Judging Fees	\$	\$	\$
Professional Fees—computer			
Professional Fees other—other consultant			
Rental Fees—Music			
Rental Fees--Pianos			
Rental Fees--Site			
Scholarships			
Lunches/Refreshments			
Mailing			
Printing			
Other (describe)			
Other (describe)			
TOTAL EXPENSES	\$	\$	\$
NET PROFIT/(LOSS)	\$	\$	\$

Suggestions for next year: _____

Explanation for budget variance: _____

Signed: _____ Date: _____

Event Activity Chair

**Send to: Nancy Longmyer
3108 Sleepy Hollow Road
Falls Church, VA 22042**