



# Granite State Area of Narcotics Anonymous Expense Sheet

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

EVENT DATE/TIME: \_\_\_\_\_ LOCATION: \_\_\_\_\_

MONEY FROM AREA (SEED MONEY) \_\_\_\_\_ (A)

LIST EXPENSES INDIVIDUALLY

\$ AMOUNT \$


TOTAL EXPENSES \_\_\_\_\_ (B)

SEED MONEY RETURNED TO AREA (A-B=C) \_\_\_\_\_ (C)

INCOME (LIST INDIVIDUALLY)


TOTAL GENERATED INCOME \_\_\_\_\_ (D)

TOTAL RETURNED TO AREA (C+D=E) \_\_\_\_\_ (E)

GSASC REPRESENTATIVE SIGNATURE \_\_\_\_\_

\*\*\*\*\* RECEIPTS ARE REQUIRED FOR ALL EXPENSES \*\*\*\*\*