FORM 990 - SUBDIVISION REPORTING FORM

NATIONAL SKI PATROL - EASTERN DIVISION YEAR ENDED - MARCH 31,

FEDERAL I.D. #16-1002936

PART	I							
LINE								
1.	Name of Region:							
1A.	Name of Subdivision reporting: (Region Section or Patrol)							
2.	For year ended (if other than 3/31) Cash on hand beginning of the Year							
3.	Checking & Petty Cash	\$						
4.	Savings & CD's	\$						
5.	TOTAL CASH ON HAND - BEGINNING OF YEAR (3+4) \$							
INCO	ME							
6.	Registration Fees	\$						
7.	Contributions	\$						
8.	Interest Income	\$						
9.	Fund Raising Income	\$						
10.	Sales of Equipment (supplies)	\$						
11.	Program Income (include	\$						
	banquet receipts)							
12.	Other (describe)							
12.1		\$						
12A. T	OTAL INCOME (Total lines 6 throu	gh 12A) \$						
EXPEN	NSES							
13.	Registration Expenses	\$						
14.	Fund Raising Expenses	\$						
15.	Cost of Equip. (supplies sold)	\$						
16.	Travel	\$						
17.	Printing & Publications	\$						
18.	Salaries & Wages	\$						
19.	Professional Fees	\$						
20.	Telephone	\$ \$						
21.	Postage	\$						
22.	Maintenance	\$						
23.	Supplies	\$						
24.	Interest Expense	\$						
25.	Program Expense(include							
	banquet and awards)	\$						
25A.	Other							
25B.								
26.	TOTAL EXPENSES (Total lines 13 through 25B) \$							
27.	Excess (Deficit) of Revenues over Expenses (Line 12A minus Line 26)							
	Cash on Hand End of Year:							
28.	Checking & Petty Cash	\$						

29.	Savings	& CD's		\$			
30.	TOTAL	CASH ON HAND - END	OF THE YEAR	(28+29) \$			
31. Tot	PROOF tal Cash or	T n Hand-Beginning of Year (L	ine 5) \$				
32. 33.	Plus: Deduct:	Total Income (Line Total Expenses (Lin	· · · · · · · · · · · · · · · · · · ·				
34. Tot	tal	Cash on Hand - End of the CLine 34 Must equal Line 36					
correct	Under pe	enalties of perjury, I declare t lete.	hat I have exami	ned this statement a	and to the best of my	knowledge	e and belief, it is true,
Name (PRINT OR TYPE)			Signature				
	Title		Date				
		Each patrol, section and region lst of each year.	n is required to o	complete this report	and file it with your	Regional I	Director or designate
Please r	read the ins	struction sheet before comple	ting this form.				
-	Patrol or S	Section DOES NOT maintair o state and sign below.	accounts at any	financial institution	n and DOES NOT U	SE the Eas	stern Division Tax I.D
Number	The and does	not maintain accounts at any	,	,	oes not use the Easte said Patrol or Section		n Tax Identification
Signed			Title	;	Date	/ /	
Name	(Print)						