

**STUDENT ACTIVITY AGENCY ACCOUNT
FIELD TRIP INCOME AND EXPENSE FORM**

Name: _____

Grade: _____

Date: _____

Place of Field Trip: _____

Expenses

• **Total cost of buses:** _____

• **Total admission cost:** _____

• **Miscellaneous cost:** _____
(explain on reverse side)

• **Total cost of trip** _____

Number of Students going on Field Trip: _____

• **Cost per pupil:** _____

• **Total collected from Students:** _____ *

Number of Students subsidized by Principal's Account: _____

• **Total amount due from Principal's Account:** _____ *

*** amounts from these two lines must equal total cost of trip**

Deposits

Date: _____ **Amount:** _____ **Made by:** _____

Date: _____ **Amount:** _____ **Made by:** _____

Date: _____ **Amount:** _____ **Made by:** _____

Total Amount Deposited: _____

***Total deposited plus amount from Principal's account must equal total cost of trip.**

Please return a copy of the student roster sheet verifying the amount of students that attended the trip and the amount collected. **Form will be completed by Business Office following each trip.**