CI	LUB BUDGET I	PLAN		
CLUB NAME:				
REVENUE				
Description	Amount	Cost	Total	
Carryover from previous year			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
	TOTAL ESTIMA	TOTAL ESTIMATED INCOME		
EXPENSES				
Description	Amount	Cost	Total	
			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
			\$0.00	
	TOTAL ESTIMA	TOTAL ESTIMATE EXPENSES		
	ESTIM	ATED PROFITS	\$0.00	
		% PROFIT	#DIV/0!	
Submitted and Approved By:				Date:
Student Club Representative				
Club Advisor:				
Approved By:				

Principal/School Administrator:			
ASB Student Council President:			
Recorded in ASB Student Council Minutes on:			
Approved by Business Office:			