

Expenses are subject to criteria established by the RRC as allowable.

NAME of RENTAL APPLICANT & NAME OF EVENT/S_____

Complete Boxes 1 and 3 for return use / Complete Boxes 2 and 3 if you have never rented before

BOX 1 : Prior Calendar Year - Revenue & Expenses FOR EVENT/S ONLY – continue on back if necessary

| REVENUE – Attach copies of: cancelled checks, receipts, event programs, all other documentation | AMOUNT | EXPENSES – Attach copies of: cancelled checks, receipts, invoices, all other documentation | AMOUNT |
|--|--------|---|--------|
| Vendor fees, attach list with fees per stand | | Printing / Postage / Copies | |
| Advertising space, attach final program | | Decorations | |
| Membership / registration fees | | Purchased signage for event | |
| Entry / participant fees | | Money donations, by applicant only | |
| Donations / fundraiser money | | Supplies for Event (attach list) | |
| Grants / sponsorship money | | Food / Beverages | |
| Compensated services | | Advertising space purchased | |
| Goods sold by rental applicant | | Equipment rental | |
| Exhibitor fees, attach list-fees per exhibitor | | Entertainment | |
| Misc.: | | Portable toilet rental | |
| Misc.: | | Misc.: | |
| Misc.: | | Misc.: | |
| Misc.: | | Misc.: | |
| TOTAL REVENUE | \$ | TOTAL EXPENSES | \$ |

BOX 2 : Projected Revenue & Expenses FOR EVENT/S ONLY – continue on back if necessary PROJECTED REVENUE ESTIMATED AMOUNT PROJECTED EXPENSES ESTIMATED AMOUNT Image: Imag

BOX 3 : DECLARATION

The information contained in this form and all attachment(s) are true and correct to the best of my knowledge. I have included all mandatory attachments with this form.

Signature____

Date:

Print Name_____

Tax Classification of Applicant

Attach IRS documentation of non-profit status*