**BUDGET MONITORING FORM**

Club: ______________________________

Fiscal Year: ___________

**BUDGET MONITORING FORMS DUE AT THE END OF EACH SEMESTER**

As of what date: _______________________

<table>
<thead>
<tr>
<th>Part I: Revenues</th>
<th>Original Budget</th>
<th>Actual YTD</th>
<th>Difference</th>
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<table>
<thead>
<tr>
<th>Part II: Expenses</th>
<th>Original Budget</th>
<th>Actual YTD</th>
<th>Difference</th>
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**Part III: Budget Adjustments (if necessary)**

Increase/Decrease Projected Revenue by the following: $______________

Increase/Decrease Projected Expenses by the following: $______________

Report prepared by club representative: ______________________________

Signature and Date

Report reviewed by club advisor: ______________________________

Signature and Date

Presented and recorded in ASB Minutes: ______________________________

Signature, Title and Date

Revised 8/5/13