**Monthly Budget Report**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Operation Department Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Month: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prepared By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Prepared for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Expenses** | **Expected** | **Actual** |
| **Revenues** |  |  |
| Membership Receivables |  |  |
| Fitness Tests Fee |  |  |
| Group Programs |  |  |
| Special Programs |  |  |
| Other Income |  |  |
| Total |  |  |
|  |  |  |
| **Expenses** |  |  |
| **Salaries** |  |  |
| Administrative |  |  |
| Full-Time |  |  |
| Part-Time |  |  |
| Contract |  |  |
| **Materials** |  |  |
| Fitness Testing |  |  |
| Clerical |  |  |
| Cleaning |  |  |
| Other Expenses |  |  |
| **Overhead** |  |  |
| Phone Charges |  |  |
| Utility Bills |  |  |
| Maintenance |  |  |
| Rent Expenses |  |  |
| Contracts |  |  |
| Other Overhead charges |  |  |
| **Total** | **0000000000** | **0000000000** |
| **Balance** | **0000000000** | **0000000000** |