



GREATER LOS ANGELES AMATEUR RADIO GROUP

GLAARG VE EXPENSE REPORT AND SESSION SUMMARY

Name: _____ Call Sign: _____
 E-Mail: _____ GLAARG VE#: _____
 Session ID: _____ Date (mm/dd/yyyy): _____
 Session City, ST ZIP / or Remote: _____

Quantity	Fee Type	Total
	Testing Fee @ \$10.00	
	Retesting Fee @ \$10.00	
	GLAARG Exam Credit Waiver @ \$0.00	
	Total Fees Collected	

Type of Expense	Amount
Postage	
Testing supplies	
Refreshments	
Travel	
Copies	
PayPal/invoice fee	
Admin fee	
Other (enter and explain below)	
Total Team Expense	
TOTAL TO GLAARG	

Total number of applicants	
Number of examinees passed	
Number of examinees failed	
Number of elements passed	
Number of elements failed	

Other expense Type: _____ Amount: _____

Make Payment via PayPal or Venmo to: naomi@glaarg.org
 Or send a check or money order to:
 Naomi Goodkin
 4029 Schuykill Dr
 Calabasas, CA 91302

Scan or take a picture of this Expense/Session report, the 605's, and the Roster sheet and attach them to an e-mail to send them to vec@glaarg.org.
 Do not send answer sheets or failed applicant info.
DO NOT SEND PAPER TO THE VEC. KEEP YOUR PAPER RECORDS FOR 15 MONTHS
 and then you can destroy them.

