



SNOWMOBILE NORTH DAKOTA TRAIL PROGRAM TRAIL ASSOCIATION REVENUE & EXPENSE REPORT

Trail Association: _____
 Reporting Period December 1, _____ to April 30, _____

A. PREVIOUS YEARS REIMBURSEMENT (OFFICE USE ONLY):

Previous Year Association Payout:	\$
Previous Year Association Miles Groomed:	Miles

B. TRAIL SIGNAGE (OFFICE USE ONLY):

Inspections	Date	Score
1 st Inspection:		
2 nd Inspection:		
3 rd Inspection:		
Average Score:		
Total Matrix Points Earned:		

C. GROOMING LENGTH (OFFICE USE ONLY):

- SECTION 1: Total Number of Weeks the Trail System is Open

Opening Date	Closing Date	Total # of Weeks Open
Total Matrix Points Earned:		

- SECTION 2: Total Miles Groomed During the Season

Groomer Odometer Reading				
Beginning Miles:		Ending Miles:		Total Miles:

D. MEETING ATTENDANCE (OFFICE USE ONLY):

Meetings (One Representative per Club from every Trail Association)		
Meetings	Date	Attended
Annual Meeting:		Yes _____ No _____
Sign & Groomer Class:		Yes _____ No _____
Trail Meeting:		Yes _____ No _____
Total Matrix Points Earned		

E. TRAILS REVENUE:

- SECTION 1: Only Report Revenue Received During the Current Season
 - Examples: Donated Fuel, Signs, Shop Supplies, Rent, Use of Vehicles (truck, ATV, Sled)
 - Attach additional documentation if more space is needed

Donations		
Company	Description of Donation	Amount
Total:		\$



Snowmobile North Dakota

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- **SECTION 2: Report Volunteer Hours Donated During the Current Season**

Volunteer Hours					
# of Volunteers:	Grooming Hours:	Trail Prep. Hours:	Meeting Hours:	Event Hours:	Total Volunteer Hours:

F. TRAILS EXPENSES:

- **SECTION 1: State Owned Groomer – Grooming Expenses**
 - Receipts must be provided to be reimbursed
 - Only report expenses that occur between December 1 – April 30
 - Expenses must follow SNDTP Guidelines

State Grooming Expenses	
Fuel:	\$
Fluids:	\$
Parts:	\$
Repairs (\$30 max):	\$
Storage (\$500/groomer max):	\$
Miscellaneous:	\$
Payroll Expenses:	\$ (Office Use Only)
Total Expenses:	\$ (Office Use Only)

- **SECTION 2: Contract Groomer - Grooming Expenses**

Contract Grooming Expenses			
Total Miles Groomed		× \$13/Mile =	\$

- **SECTION3: Trail Closure (Office Use Only)**

Reported By	Date Reported	Staff Initials
Comments:		

G. STATE GROOMER & DRAG SUMMER STORAGE LOCATION:

1. Storage Location Contact Info.				2. Storage Location Contact Info.			
ICN#:		Contact:		ICN#:		Contact:	
Phone:				Phone:			
Address:				Address:			
City:		State:		Zip:		City:	
				State:			
				Zip:			

H. SIGNATURES

Trail Coordinator Signature	Print Name	Phone #	Date

THIS INVOICE APPROVED FOR PAYMENT BY (Office Use Only):

Date Received:	Date Processed:	Initials:	Date Paid:	Amount:	Check#: