

FLORIDA COMMUNITY COLLEGES
Intercollegiate Athletics Financial Report
CAPITAL PROJECTS

College Name: _____ **FY** 2001-02

PART I. SOURCE OF FUNDS - CAPITAL PROJECTS

Gifts/Fund Raising	\$0
Gate Receipts	0
Concessions	0
Auxiliary Funds	0
Capital Improvement Fees	0
Miscellaneous Revenues	0
College Operating Funds	0
TOTAL REVENUES	\$0

PART II. CAPITAL PROJECT EXPENDITURES LIST

(LIST BY PROJECTS)

1.	\$0
2.	0
3.	0
4.	0
5.	0
6.	0
7.	0
8.	0
9.	0
TOTAL	\$0

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PART III. OPERATING SOURCE OF FUNDS

Gifts/Fund Raising	\$0
Gate Receipts	0
Concessions/Programs	0
Auxiliary Funds	0
Capital Improvement Fees	0
Activity and Service Fees	0
Financial Aid Fees	0
Miscellaneous Revenues - (List on part VII, #1)	0
College Operating Funds - Fund 1	0
TOTAL REVENUES	\$0

\$0

PART IV. OPERATING EXPENDITURES

Personnel Costs	\$0
Student Scholarships	0
Operating Expenses	0
Equipment	0
TOTAL OPERATING EXPENDITURES	\$0

FLORIDA COMMUNITY COLLEGES
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OPERATING EXPENDITURES BY SPORT

College Name: _____ FY 2001-02

PART V. OPERATING EXPENDITURES BY SPORT

Administration and General		
Athletic Dir/Assoc/Office	\$0	0
Sports Information	0	
Coaches/Trainers	0	0
Medical/Insurance	0	
Equipment Management	0	
Fund Raising Office	0	
Gymnasiums/Fields	0	
Ticket Distribution	0	
Other Miscellaneous	0	
Subtotal	\$0	
Men's Athletics		
Baseball	\$0	0
Basketball	0	
Golf	0	
Soccer	0	
Swimming	0	
Tennis	0	
Track/Field/Cross Country	0	
Wrestling	0	
Other - (Specify on Part VII, #2)	0	
Subtotal	\$0	
Women's Athletics		
Softball	\$0	0
Basketball	0	
Golf	0	
Soccer	0	
Gymnastics	0	
Swimming	0	
Tennis	0	
Track/Field/Cross Country	0	
Volleyball	0	
Other - (Specify on Part VII, #3)	0	
Subtotal	\$0	
Total - Must equal Total on Part IV	\$0	\$0

IF NOT 0
OR BLANK
READ INST.

FLORIDA COMMUNITY COLLEGES
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PARTICIPANTS BY SPORT

College Name: _____ **FY** 2001-02

PART VI. PARTICIPANTS BY SPORT

Men's Athletics

Baseball	0
Basketball	0
Golf	0
Soccer	0
Swimming	0
Tennis	0
Track/Field/Cross Country	0
Wrestling	0
Other - (Specify on Part VII, #4)	0
Subtotal	0

0

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Women's Athletics

Softball	0
Basketball	0
Golf	0
Soccer	0
Gymnastics	0
Swimming	0
Tennis	0
Track/Field/Cross Country	0
Volleyball	0
Other - (Specify on Part VII, #5)	0
Subtotal	0
TOTAL	0

0

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College Name: _____ **FY** **2001-02**

PART VII. OTHER		IF NOT 0 OR BLANK READ INST.
1. Miscellaneous Revenue List		
	\$0	
	0	
	0	
	0	
	0	
Total - Must equal Part III, Miscellaneous Revenues	\$0	\$0
		IF NOT 0 OR BLANK READ INST.
2. Men's Athletics - Other Operating Expenditures by Sport		
	\$0	
	0	
	0	
	0	
	0	
Total - Must equal Part V, Men's Athletics, Other Operating Expenditures by Sport List	\$0	\$0
3. Women's Athletics-Other Operating Expenditures by Sport		
	\$0	
	0	
	0	
	0	
	0	
Total - Must equal Part V, Women's Athletics, Other Operating Expenditures by Sport List	\$0	\$0
4. Men's Athletics - Participants by Sport List		
	0	
	0	
	0	
	0	
	0	
Total - Must equal Part VI, Men's Athletics, Participants by Sport	0	\$0
5. Women's Athletics - Participants by Sport List		
	0	
	0	
	0	
	0	
	0	
Total - Must equal Part VI, Women's Athletics, Participants by Sport	0	\$0

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PARTICIPANTS BY SPORT

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PART VIII. VALUE OF 40 FTE EXEMPTION BY SPORT

Men's Athletics	AMOUNT	
Baseball	\$0	0
Basketball	0	
Golf	0	0
Soccer	0	
Swimming	0	
Tennis	0	
Track/Field/Cross Country	0	
Wrestling	0	
Other - Specify:	0	
Subtotal	\$0	
Women's Athletics		
Softball	\$0	0
Basketball	0	
Golf	0	0
Soccer	0	
Gymnastics	0	
Swimming	0	
Tennis	0	
Track/Field/Cross Country	0	
Volleyball	0	
Other - Specify:	0	
Subtotal	\$0	
TOTAL	\$0	

COMMENTS (Provide below comments or explanations as needed):