PRIVATE CLUBS

Expenditure Statement

Account Number: ____________________ Premise Name: ____

Ownership Name: ____

NUMBER OF CLUB MEMBERS:

☐☐☐☐☐☐☐☐☐☐

EXPENDITURE FOR ALL LIVE ENTERTAINMENT
(Including D.J. and Karaoke)

If Seasonal Operation (Opening to Closing Date):

☐

Payments Made
For All Entertainment: $ ☐
(See Schedule I of Rate Schedule)

Plus Accommodations: $ (Reasonable
value of accommodations or services furnished to musicians and entertainers (Schedule I of Rate Schedule)

Plus Mechanical Music: $ ☐
(See Schedule II of Rate Schedule)

Total: $ ☐☐☐☐☐☐☐☐☐☐ . ☐☐

MECHANICAL MUSIC (See Schedule II of Rate Schedule)

AUDIO MUSIC SUPPLIER

Was Mechanical Music furnished by an ASCAP Licensed Supplier?

○ Yes ○ No

Supplier Name ___________________________
Music Supplier Account # __________________
City_________________________ State _____
Telephone _ _

OTHER MECHANICAL MUSIC USES

AUDIO MUSIC Please check the type of Audio Music used.

☐ CDs/Tapes

☐ Radio (Not Satellite)

☐ Karaoke

☐ Other

☐ Satellite Radio Only: ☐ XM Radio ☐ Sirius

SATELLITE RADIO SUBSCRIPTION

Subscriber Name ________________________________
Member ID _______________________
City_____________________________ State _____
Telephone ______________________

AUDIO VISUAL USES

☐ Large TV ☐ Video Karaoke

☐ Multiple TV ☐ Other

☐ DVD/VCR

Contact Person & Title ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Phone Number: ☐☐☐ - ☐☐☐ - ☐☐☐☐ Ext: ☐☐☐☐☐ Fax Number: ☐☐☐ - ☐☐☐ - ☐☐☐☐

Email: ☐ Website: ☐

I certify the above information is true and correct.

Dated: ☐☐ / ☐☐ / ☐☐☐☐ Signature: ☐

ASCAP Toll Free: 1-800-505-4052

Epayment Websites: http://www.ascap.com/mylicense or http://www.ascap.com