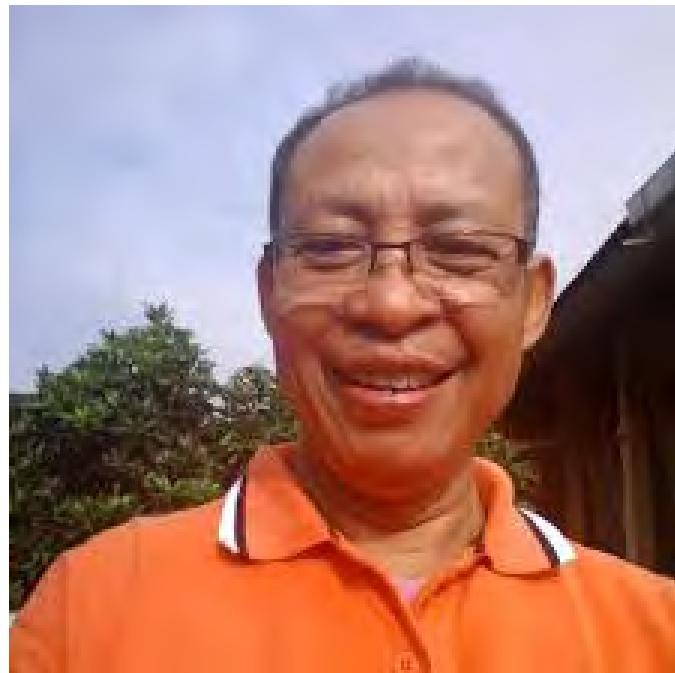


9/9/2018



SPHM
HOSPITALITY

GOLF – ACCOUNTING FORMS



By: | Agustinus Agus Purwanto, SE MM



Series 200

Club Forms - Accounting



Petty Cash Receipt

#:

Fill out when Drawing Petty Cash Advance

Name:	Department:
-------	-------------

Date:	Amount of Petty Cash Advance: \$
-------	----------------------------------

Purpose of Advance:

Fill out when Returning Purchase Receipts

Expense Code	\$ Amount
Total Spent	

Amount Drawn:	\$
Amount Spent:	\$
Amount Returned:	\$
Turn in all receipts with this slip. If reimbursement is due, Purchaser's signature below confirms reimbursement.	
Purchaser's Signature:	
Controller's Signature:	

SPHM Form 201

Effective: 09/18



Petty Cash Receipt

#:

Fill out when Drawing Petty Cash Advance

Name:	Department:
-------	-------------

Date:	Amount of Petty Cash Advance: \$
-------	----------------------------------

Purpose of Advance:

Fill out when Returning Purchase Receipts

Expense Code	\$ Amount
Total Spent	

Amount Drawn:	\$
Amount Spent:	\$
Amount Returned:	\$
Turn in all receipts with this slip. If reimbursement is due, Purchaser's signature below confirms reimbursement.	
Purchaser's Signature:	
Controller's Signature:	

SPHM Form 201

Effective: 09/18

SPHM Golf & Country Club

Daily Revenue Report

Month	<input type="text"/>
Day of Week	<input type="text"/>
Date	<input type="text"/>
Rounds of Golf (#)	
Men Golf Member	<input type="text"/>
Lady Golf Member	<input type="text"/>
Men Sports Member	<input type="text"/>
Lady Sports Member	<input type="text"/>
Unaccompanied	<input type="text"/>
Accompanied	<input type="text"/>
Junior	<input type="text"/>
Reciprocal	<input type="text"/>
Outings (\$110)	<input type="text"/>
PGA/Empl	<input type="text"/>
Coupon	<input type="text"/>
Other	<input type="text"/>
Total Rounds	0
Golf Income (\$)	
Greens Fees	<input type="text"/>
Cart Fees	<input type="text"/>
Merchandise Sales	<input type="text"/>
Lessons	<input type="text"/>
Other Golf Income	<input type="text"/>
Total Golf Income	0
# Merch Transactions	<input type="text"/>
Shoe Service (\$)	<input type="text"/>
Tennis	
Court Fees	<input type="text"/>
Lessons	<input type="text"/>
Racquet Stringing Income	<input type="text"/>
Ball Mach Rental	<input type="text"/>
Merchandise Sales	<input type="text"/>
Other Tennis Income	<input type="text"/>
Total Tennis Income	0
# Merch Transactions	<input type="text"/>
Activities	
Birthday Parties	<input type="text"/>
Kids Corner Fees	<input type="text"/>
Fitness Fees	<input type="text"/>
Massage Income	<input type="text"/>
Holiday Events Income	<input type="text"/>
Special Events Income	<input type="text"/>
Activities Fees	<input type="text"/>
Summer Camp Fees	<input type="text"/>
Pool Guest Fees	<input type="text"/>
Total Activity Income	0
# Activity Transactions	<input type="text"/>

Dining Room Covers (#)	
Lunch	<input type="text"/>
Dinner	<input type="text"/>
Dining Room Sales (\$)	
Lunch	<input type="text"/>
Dinner	<input type="text"/>
Fine Dining/Brunch Covers (#)	
Brunch	<input type="text"/>
Dinner	<input type="text"/>
Fine Dining/Brunch Sales (\$)	
Brunch	<input type="text"/>
Dinner	<input type="text"/>
Catering Covers (#)	
Lunch	<input type="text"/>
Dinner	<input type="text"/>
Reception Counts	<input type="text"/>
Catering Sales (\$)	
Lunch	<input type="text"/>
Dinner	<input type="text"/>
Receptions	<input type="text"/>
Misc Food Revenue (\$)	
Locker Rooms	<input type="text"/>
Beverage Cart	<input type="text"/>
Turn House	<input type="text"/>
Pool Cabana	<input type="text"/>
Other	<input type="text"/>
Beverage Revenue by Location (\$)	
Beverage Cart	<input type="text"/>
Turn House	<input type="text"/>
Clubhouse Lounge	<input type="text"/>
Members' Lounge	<input type="text"/>
Other Locations	<input type="text"/>
Pool Cabana	<input type="text"/>
Catering	<input type="text"/>
Home Wine	<input type="text"/>
Beverage Revenue Mix (\$)	
Beer	<input type="text"/>
Wine	<input type="text"/>
Liquor	<input type="text"/>
Other Income	
Service Charge	<input type="text"/>
Total Food Revenue	0
Total Beverage Revenue	0
Total Daily Revenue	0

Budget Data

2018

Enter the monthly budgeted amount for the categories listed. For Memberships, enter the month-end projected number per category of membership.

Days per Month	31	29	31	30	31	30	31	31	30	31	30	31	366
# of Weeks/Month	4.43	4.14	4.43	4.29	4.43	4.29	4.43	4.43	4.29	4.43	4.29	4.43	52.3

Golf Rounds
 Green Fees
 Cart Fees
 Golf Merch Sales
 Golf Lesson
 Shoe Service
 Tennis Fees
 Tennis Lessons
 Racquet Stringing
 Ball Mach Rental
 Tennis Merch Sales
 Activity - Birthday Parties
 Activity - Kids' Corner Fees
 Activity - Fitness Fees
 Activity - Massage Sessions
 Activity - Holiday Events
 Activity - Special Events
 Activity - Summer Camp
 Dining Room Covers
 Dining Room Sales
 Fine Dining/Brunch Covers
 Fine Dining/Brunch Sales
 Catering Counts
 Catering Sales
 Food - Locker Room
 Food - Beverage Cart
 Food - Turn House
 Food - Pool Cabana
 Food - Other
 Bev - Beverage Cart
 Bev - Turn House
 Bev - Clubhouse Lounge
 Bev - Members' Lounge
 Bev - Other Locations
 Bev - Pool Cabana
 Bev - Catering
 Bev - Home Wine
 Bev - Beer
 Bev - Wine
 Bev - Liquor
 Service Charge
 Mbr - E Golf
 Mbr - E Sports
 Mbr - E S/T
 Mbr - Community
 Mbr - I Golf
 Mbr - Corporate
 Mbr - I Sports
 Mbr - I S/T
 Mbr - Social

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Tot
Golf Rounds													0
Green Fees													0
Cart Fees													0
Golf Merch Sales													0
Golf Lesson													0
Shoe Service													0
Tennis Fees													0
Tennis Lessons													0
Racquet Stringing													0
Ball Mach Rental													0
Tennis Merch Sales													0
Activity - Birthday Parties													0
Activity - Kids' Corner Fees													0
Activity - Fitness Fees													0
Activity - Massage Sessions													0
Activity - Holiday Events													0
Activity - Special Events													0
Activity - Summer Camp													0
Dining Room Covers													0
Dining Room Sales													0
Fine Dining/Brunch Covers													0
Fine Dining/Brunch Sales													0
Catering Counts													0
Catering Sales													0
Food - Locker Room													0
Food - Beverage Cart													0
Food - Turn House													0
Foor - Pool Cabana													0
Food - Other													0
Bev - Beverage Cart													0
Bev - Turn House													0
Bev - Clubhouse Lounge													0
Bev - Members' Lounge													0
Bev - Other Locations													0
Bev - Pool Cabana													0
Bev - Catering													0
Bev - Home Wine													0
Bev - Beer													0
Bev - Wine													0
Bev - Liquor													0
Service Charge													0
Mbr - E Golf													
Mbr - E Sports													
Mbr - E S/T													
Mbr - Community													
Mbr - I Golf													
Mbr - Corporate													
Mbr - I Sports													
Mbr - I S/T													
Mbr - Social													

* To calculate the number of weeks per month:

SPHM Golf Course & Country
Club

Capital Asset Purchase Request

Department:	Date:		
Requested Item:	Replacement Item	New Opportunity	
Describe Use or Purpose of Item:			
Where it will be used:			
Estimated Purchase Cost:	Priority:	High	Medium
Installation Costs? If so, how much?			
List Utility Needs:			
Estimated Annual Utility Costs:			
Does item need staff training to operate? If so, how much?			
Benefit to Club:	Enhanced Revenue	Cost Avoidance	Improved Productivity
Proposed Purchase Date:	1 st Qtr	2 nd Qtr	3 rd Qtr
4 th Qtr			
Explain:			
If item enhances revenue, avoids cost, or improves productivity, what is the payback on the investment?			
Method used for calculation:	Payback	Net Present Value	Internal Rate of Return
Comments:			
Attach Payback Analysis			
Department Head's Signature: _____			

SPHM Golf Course & Country
Club

Capital Budget Request Summary

Department:

Date:

Priority	Item	Estimated Cost	Reason/Comments
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			

Department Head Signature:

SPHM Golf & Country Club

Consumable Supply Inventory

Inventoried by: _____

Department: _____

Inventory Date: _____

Inventory		Stock Locations				Total Invent	Prev Mo's Inventory	Purchases/Receipts	Adjust/Transfers	# of Items Consumed
#	Item	1	2	3	4					
1										0
2										0
3										0
4										0
5										0
6										0
7										0
8										0
9										0
10										0
11										0
12										0
13										0
14										0
15										0
16										0
17										0
18										0
19										0
20										0
21										0
22										0
23										0
24										0
25										0
26										0
27										0
28										0
29										0
30										0
31										0
32										0
33										0
34										0
35										0
36										0
37										0
38										0
39										0
40										0

**SPHM Golf Course & Country
Club**

Linen Inventory Count Sheet

Department:		Date:				
Count Conducted By:			Signature:			
Item	Location #1	Location #2	Location #3	Location #4	Location #5	Total Count
Bath Towels						
Hand Towels						
Cart Towels						

SPHM Form 207

Department Head Signature

Effective: 3/10/18

**SPHM Golf Course & Country
Club**

Linen Inventory Count Sheet

Department:		Date:				
Count Conducted By:			Signature:			
Item	Location #1	Location #2	Location #3	Location #4	Location #5	Total Count
Bath Towels						
Hand Towels						
Cart Towels						

SPHM Form 207

Department Head Signature

Effective: 3/10/18

**SPHM Golf Course & Country
Club**

China Inventory Count Sheet

Department:

Date:

Count Conducted by:

Signature:

Item	Location #1	Location #2	Location #3	Total Count	Par Level	Deviation fm Par
Entrée Plates						
Bread & Butter Plates						
Soup Bowls						
Pasta Bowls						
Coffee Cups						
Coffee Cups, Stackable						
Saucers						

Comments:

SPHM Golf Course & Country Club

Flatware Inventory Count Sheet

Department:	Date:
Count Conducted by:	Signature:

Item	Location #1	Location #2	Location #3	Total Count	Par Level	Deviation fm Par
Knives, Table						
Forks, Table						
Spoons, Table						
Spoons, Soup						
Forks, Dessert						
Knives, Dessert						
Knives, B&B						
Comments						

Department Head Signature

SPHM Golf & Country Club

Glassware Inventory Count Sheet

SPHM Golf Country Club

Furniture, Fixtures Equipment Inventory

Dept: _____

Inventoried by: _____

Page #: _____ **of:** _____

Inventory

SPHM Golf & Country Club

a

Annual FF&E Inventory Summary Report

Total	
-------	--

Total

Controller's Signature:

SPHM Golf & Country Club**Departmental Property Receipt**

Dept. _____

Responsible Party: _____

Signature: _____

#	Item	Description	Location	Quantity	Property Decal #
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
32					
33					
34					
35					
36					
37					
38					
39					
40					

SPHM Golf & Country Club

Property Transfer

This form is used to transfer Property from one Department's Property Receipt to another.

Transfer From Dept:

Transfer To Dept:

	Item	Description	Location	Quantity	Property Decal #
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Reason:

Gaining Department Head's Signature/Date

Losing Department Head's Signature/Date

SPHM Golf & Country Club

Member Adjustment

Member Name:

#:

Member #:

Date:

Time:

Sales (G/L)Account Adjustment Made To:

Amount:

Reason or Problem that Resulted in Adjustment (Please describe fully):

If Problem, Factors Contributing to Problem:

If Problem, Proposed Solution(s) to Problem:

Employee Reporting Problem:

Department:

General Manager Signature:

Date:

SPHM Golf & Country Club

Departmental Transfer

Function:	Date:
Transfer From:	Transfer To:

	Item	Quantity	Unit Cost	Extended Cost	Gaining Expense Code
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					

Total

Reason:

Losing Mgr's Signature:

Gaining Mgr's Signature:

SPHM Golf & Country Club

Activity Event Profit & Loss

Event: _____

Date: _____

Location: _____

Income:	G/L Acct #	Count	Amount	Total Budget	Actual
Activity Fees			@		
Food Income			@		
Beverage Income			@		
Other:					
Other:					
Other:					
Total Income					

Expenses:					
Entertainment/Costumes					
Décor					
Audio/Visual					
Equipment					
Supplies					
Transportation					
Tips					
Ticket Costs					
Food Expense			@		
Beverage Expense			@		
F&B Labor					
Prizes/Giveaways					
Promotional Costs					
Staff Tickets					
Other:					
Other:					
Other:					
Total Expenses					

Comments:

Activity Director's Signature: _____ Date: _____

Enter Your Club Name Here	Planning Questions
Enter the answers to the questions in the shaded cells.	
Year: <u>2018</u>	
1. What are your projected Annual Retail Sales? 2. What is the square footage of your shop? 3. What percentage of your Annual Buy will be in the Spring?	
The remainder of your Annual Buy is for the Fall.	100.0%
SOFT GOODS	
4. What percentage of your Annual Buy will be Soft Goods (clothing, hats, gloves & outerwear)? 4a. What percentage of your Soft Goods sales will be Hats? 4b. What percentage of your Soft Goods sales will be Gloves? 4c. What percentage of your Soft Goods sales will be Outerwear? 4d. What percentage of your Soft Goods buy will be for Closeouts? 4e. What percentage of your Soft Goods buy will be for Clothing? 5. What % of each Soft Goods Buy do you want to reserve for Closeouts? 6. What % of the Clothing Buy is for Men? 7. The remainder of the Clothing Buy is for Women.	
7a. What % of the Clothing Buy do you want to spend on Basic Wear Shirts? 7b. What % of the Clothing Buy do you want to spend on Basic Wear Shorts? 7c. What % of the Clothing Buy do you want to spend on Basic Wear Pants? 7d. What % of the Clothing Buy do you want to spend on Kids' Wear? 7e. And the remainder is for the Fashion Buy.	
8. What is your target cost of goods sold (CoGS) for Soft Goods?	
HARD GOODS	
9. The remainder of the Annual Buy will be Hard Goods (shoes, equipment, balls, bags, access. & misc). 9a. What percentage of Hard Goods sales will be Golf Balls? 9b. What percentage of Hard Goods sales will be Accessories and Miscellaneous? 9c. What percentage of Hard Goods sales will be Shoes? 9d. What percentage of Hard Goods sales will be Golf Bags? 9e. What percentage of Hard Goods sales will be Equipment? 10. What is your target cost of goods sold for Golf Balls? 11. What is your target cost of goods for Accessories & Miscellaneous? 12. What is your target cost of goods sold for Shoes? 13. What is your target cost of goods sold for Golf Bags? 14. What is your target cost of goods sold for Equipment?	

SPHM Golf Country Club

Enter Your Club Name Here	Spring Buy
	Year: 2018
1. Amount of Spring Buy (Annual Proj. Sales x % Spring Buy)	Projected \$0
2. Amount of Soft Goods Buy (Spring Buy x % Soft Goods Buy) at retail	\$0
3. Amount of Soft Goods Buy at cost (Soft Goods Buy x CoGS %)	\$0
4. Reserve for Closeouts (Spring Buy x % Reserved for Closeouts)	\$0
	Remainder \$0
5. Hats Buy Soft Goods Buy x % for Hats)	\$0
	Remainder \$0
6. Glove Buy Soft Goods Buy x % for Gloves)	\$0
	Remainder \$0
7. Outerwear Buy (Spring Buy x % for Outerwear)	\$0
	Remainder for Clothing Buy \$0
8. Basic Wear Buy (Clothing Buy x % for Basic Wear)	
Shirts	\$0
Shorts	\$0
Pants	\$0
	Total Basic \$0
9. Kids' Wear Buy (Clothing Buy x % for Kids' Wear)	\$0
	Total Basic & Kids' \$0
	Remainder for Fashion Buy \$0
10. Men's Fashion Buy (Fashion Buy x % of Men's Fashion Buy)	0
11. Women's Fashion Buy	0

SPHM Golf Country Club

Enter Your Club Name Here	Fall Buy	Year: 2018	Actual
1. Amount of Fall Buy (Annual Proj. Sales x % Fall Buy)	Projected \$0		
2. Amount of Soft Goods Buy Fall Buy x % Soft Goods Buy) at retail	\$0		
3. Amount of Soft Goods Buy at cost (Soft Goods Buy x CoGS %)	\$0		
4. Reserve for Closeouts Fall Buy x % Reserved for Closeouts)	\$0		
	Remainder	\$0	
5. Hats Buy Soft Goods Buy x % for Hats)	\$0		
	Remainder	\$0	
6. Glove Buy Soft Goods Buy x % for Gloves)	\$0		
	Remainder	\$0	
7. Outerwear Buy (Spring Buy x % for Outerwear)	\$0		
	Remainder for Clothing Buy	\$0	
8. Basic Wear Buy (Clothing Buy x % for Basic Wear)			
Shirts	\$0		
Shorts	\$0		
Pants	\$0		
	Total Basic	\$0	
9. Kids' Wear Buy (Clothing Buy x % for Kids' Wear)	\$0		
	Total Basic & Kids'	\$0	
	Remainder for Fashion Buy	\$0	
10. Men's Fashion Buy (Fashion Buy x % of Men's Fashion Buy)	0		
11. Women's Fashion Buy	0		

SPHM Golf Country Club

Enter Your Club Name Here

Spring Fashion Buy Detail

Year: 2018

1. Amount of Men's Spring Fashion Buy. Projected
\$0 Actual

2. List Men's Clothing Lines & % of Men's Fashion Buy.

List of Clothing Lines	%	
Enter name	<input type="text"/>	\$0
Enter name	<input type="text"/>	\$0
Enter name	<input type="text"/>	\$0
Enter name	<input type="text"/>	\$0
Enter name	<input type="text"/>	\$0
Enter name	<input type="text"/>	\$0
Total	0%	Total <input type="text"/> \$0

3. Amount of Women's Spring Fashion Buy. \$0

4. List Women's Clothing Lines & % of Women's Fashion Buy.

List of Clothing Lines	%	
Enter Name	<input type="text"/>	\$0
Enter Name	<input type="text"/>	\$0
Enter Name	<input type="text"/>	\$0
Enter Name	<input type="text"/>	\$0
Total	0%	Total <input type="text"/> \$0

SPHM Golf Country Club

Enter Your Club Name Here

Fall Fashion Buy Detail

Year: 2018

	Projected	Actual
1. Amount of Men's Fall Fashion Buy.	\$0	
2. List Men's Clothing Lines & % of Men's Fashion Buy.		
List of Clothing Lines	%	
Enter Name		\$0
Total	0%	Total \$0
3. Amount of Women's Fall Fashion Buy.	\$0	
4. List Women's Clothing Lines & % of Women's Fashion Buy.		
List of Clothing Lines	%	
Enter Name		\$0
Total	0%	Total \$0

SPHM Golf & Country Club

Pre-Cost Menu Pricing

Menu Item: App Entrée Dessert Salad Soup

Portion Size:

Date:					
<input type="checkbox"/>	a la Carte	<input type="checkbox"/>	Lunch	<input type="checkbox"/>	Dinner
<input type="checkbox"/>	Catering	<input type="checkbox"/>	Lunch	<input type="checkbox"/>	Dinner

Multipliers to achieve food cost %	
Food Cost %	Multiplier
25	4.0
30	3.3
33	3.0
35	2.9
37	2.7
40	2.5
45	2.2

Cost per Portion	
Multiplier	
Theoretical Selling Price	
Actual Selling Price	

Remarks:

Chef's Signature

Date

SPHM Golf & Country Club

Buffet Post-Cost Analysis

Buffet Event:	
Price per Adult:	per Child:
Projected Attendance:	
Associated Bev Revenue:	

Date:						
Meal:	<input type="checkbox"/>	Brunch	<input type="checkbox"/>	Lunch	<input type="checkbox"/>	Dinner
Actual Attendance:						
Total Food Revenue:						
Total Food Cost (fm below):						
Event Profit (Loss):						

Attach additional pages if necessary

Total Cost

Count items put out less items returned with value. Multiply total items put out times item cost to determine extended cost.

*Items returned with value have resale value, e.g., roast beef used in another menu item such as beef hash.

Remarks:

Chef's Signature

Date

Your Club Name Here

Date:

SPHM Golf & Country Club

Catering Contract

#:

Proposal Date:	Food Costs:	
Function Date:	Per Person: _____	
Client Name:	Bar/Beverage Costs:	
Contact:	Per Person: _____	
Address:	Bartender Fee: _____	
Phone (home):	Ceremony Site Fee: _____	
Phone (work):	Room Fee: _____	
Email address:	Set Up Fee: _____	
Type of Function:	Service Charge: _____	
Location:	Rentals: _____	
Time: From: to:	Total Estimated Charges: _____	
Approximate Number of Guests:	Special Arrangements: _____	
Color Scheme:	Prices are quoted for _____ approximately guests. Your final guarantee must be provided by: _____	
Other Requirements/Arrangements:	Any adjustments will be reflected on the final statement. State and local sales tax will also be shown on this statement.	

If the final guarantee is not received by _____, then the final count will be _____ as stated in this contract.

Beverage Service Instructions:

Food Service Instructions:**Name of Person(s) Authorized to Make Changes for Client:**

Deposits being applied to the final invoice:	_____	Holding Deposit	Date Rcvd: _____
	_____	Confirming Deposit	Date Rcvd: _____
	_____	Final Deposit	Date Rcvd: _____

After reviewing the above proposal, please date, sign and return to the Club with your member number, check, money order, or cashier's check. Full and final payment is due the day of the function. Upon acceptance of this proposal and the Club's catering policies, acknowledge by signature, that this proposal becomes a valid, binding contract, subject to all terms and conditions as stated herein.

Client Signature _____

Date _____

Club Representative Signature _____

Date _____

1. **PAYMENT:** Payment for all functions will be charged to the member's account the day of the event for all remaining balances due. If arrangements have been made in advance, a member's company or organization may be direct billed.
2. **DEPOSITS:** A preliminary holding deposit of \$500.00 is required. Upon agreement of function details, a Contract will be forwarded. This Contract, when signed, becomes binding, and requires a confirming deposit of 1/3 (33.3%) of the Estimated Total Charges. Forty-five days prior to the event an invoice for a final deposit of 1/3 will be sent to the member. This deposit is due not later than 30 days prior to the event. All deposits are non-refundable.
3. **ADDITIONAL GOODS AND SERVICES:** The Club will provide services based upon the guaranteed number of guests stipulated in the Contract. The Club will attempt to provide like services should the attendance be greater than the guaranteed number, however, if attendance exceeds 105% of the final guarantee, an additional premium charge of 15% of the per person price will be charged for each person over 105%.
4. **FUNCTION SIZE/EVENT LOCATION:** The Club reserves the right to accommodate groups/parties in adequate and appropriate areas as needed for the function if the original estimated attendance varies more than ten percent (10%).
5. **DAMAGES:** Any damages occurring to the property of the Club by a client(s), guests, or contractors, will be the responsibility of the client(s) and he will be billed for the damages. The Club is NOT responsible for any items left on the premises or items that are lost, stolen, or damaged.
6. **ENTERTAINMENT:** All outside entertainment must be booked through the Catering Department. An entertainment contract will be prepared specifying hours of play, number and length of breaks, compensation, and other items to protect the Club's interest. The Club will pay entertainers and the client(s) will be billed for the entertainment along with other event charges.
7. **FOOD & BEVERAGE PRICES:** Prices are subject to change due to market conditions. Prices quoted far in advance cannot be considered firm. Firm prices will be quoted approximately sixty (60) days prior to the function date. Prices do not generally fluctuate more than ten percent (10%) up or down.
8. **MENU SELECTION:** The pre-determined menu will be served to all guests. Limited dietary substitutions may be made when requested in advance.
9. **CANCELLATION/POSTPONEMENT:** In the event of cancellation all deposits are non-refundable. The Club reserves the right to require 75% payment for all contracted services if the event is cancelled within sixty (60) days of the event date.
10. **GUARANTEE OF ATTENDANCE:** A guarantee is due fourteen (14) days prior to the event date. The client(s) will be billed for the guaranteed number, OR the number of persons served, whichever is greater.
11. **RIGHT OF INSPECTION:** The Club reserves the right to inspect and control all functions held on the premises. All state and local laws concerning and governing the purchase and consumption of food and beverages will be adhered to and enforced.
12. **HEALTH DEPARTMENT REGULATIONS:** It is forbidden to bring in or take out any food or beverages to or from the premises. Remains of wedding or specialty cakes will be the exception to this regulation.
13. **ADVERTISING:** Any advertising prepared by the client using the name of the Club must be approved by the Catering Manager prior to advertising the event.
14. **DISPLAYS, EXHIBITS, AND DECORATIONS:** All displays, exhibits, and decorations must conform to fire ordinances and rules. Nothing is to be affixed to walls, floors, or ceilings of rooms with nails, staples, tape or any other substance unless approved prior to the date of the event. Use of such items without the express approval of the Club may result in charges to repair such damages.
15. **ENGINEERING AND AUDIOVISUAL:** Special engineering requirements must be specified to the Catering Manager at least fourteen (14) days prior to the event. Clients may provide their own equipment, however, if assistance is required, a technician fee will be assessed. Audiovisual equipment rental is available and rates are quoted upon request.
16. **CLUB ATTIRE POLICY:** Members and designees must dress in a fashion befitting the surroundings and atmosphere provided in the setting of the Club. Gentlemen and ladies are requested to dress in a fashion compatible with the appropriate occasion. For lunch, appropriate informal, casual sports attire may be worn. Shirts and shoes must be worn at all times when on the Club Facilities, except in the pool areas. The following is considered inappropriate attire: halter tops, tank tops, tee shirts, fishnet tops, cut-offs, jams, sweat pant, jeans, bathing suits (except in the pool areas), tennis shorts or other athletic shorts more than four inches above the knee are not permitted.

I HAVE READ THE ABOVE CATERING POLICIES AND AGREE TO ADHERE TO ALL TERMS AND CONDITIONS AS STATED HEREIN.

Client Signature

Date

Club Representative Signature

Date

SPHM Golf & Country Club

Catering Deposit Log

Club:

Sequential Page Number:

SPHM Golf & Country Club

Purchase Order

Club:
Department:

Purchase Order Number
Date:

Vendor Name:
Address:
City/State/Zip:

Contact:
Work Phone:
FAX:
Mobile:

Attach additional pages if necessary

Total Cost	
Sales Tax	
Est. Shipping	
Total Cost	

Remarks:

Department Head Signature

Date

General Manager Signature

Date

Your Club Name Here

PERIOD ENDING 04/03/08

Pay Period 8

Department	Reg Hours	OT Hours	Vac Hours	Sick Hours	Other Hours	Hol Hours	Total Hours	Total \$	Average/Hr	Bonus Commissions Other
Golf Pro	80.00	0.00	0.00	0.00	0.00	0.00	80.00	-	0.00	
Assistant Golf Pros	80.00	0.00	0.00	0.00	0.00	0.00	80.00	-	0.00	
Merchandise Mgr.	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Cart Attendants	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Golf Shop Attendants	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Outside Service Manager	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Starter Ranger	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
GOLF OPER. TOTAL	160.00	0.00	0.00	0.00	0.00	0.00	160.00	0.00	0.00	
Turnstand	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Beverage Cart	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Coffee and Cone	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Cabana	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Dining Svcs Manager	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Dining Room Managers	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Asst Dining Rm Mgr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Catering Sales	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Servers	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Servers Asst	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Host/Hostess	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
FOOD SERVICE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	#DIV/0!	
Bartenders	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
BEVERAGE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	#DIV/0!	
Cooks	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Dishwashers	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Receiving Manager	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Pastry Chef	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Catering Chef	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Sous Chef	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Chef	80.00	0.00	0.00	0.00	0.00	0.00	80.00	-	0.00	
FOOD PRODUCTION	80.00	0.00	0.00	0.00	0.00	0.00	80.00	0.00	0.00	
F&B TOTAL	80.00	0.00	0.00	0.00	0.00	0.00	80.00	0.00	0.00	
Membership Director	80.00	0.00	0.00	0.00	0.00	0.00	80.00	-	0.00	
Membership Coordinator	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
MEMBERSHIP TOTAL	80.00	0.00	0.00	0.00	0.00	0.00	80.00	0.00	0.00	
General Manager	80.00	0.00	0.00	0.00	0.00	0.00	80.00	-	0.00	
Personnel Administrator	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Receptionist	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
Controller	80.00	0.00	0.00	0.00	0.00	0.00	80.00	-	0.00	
Club Accountant	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-	#DIV/0!	
G&A TOTAL	160.00	0.00	0.00	0.00	0.00	0.00	160.00	0.00	0.00	

Your Club Name Here

PERIOD ENDING 04/03/08

Pay Period 8

Department	Reg Hours	OT Hours	Vac Hours	Sick Hours	Other Hours	Hol Hours	Total Hours	Total \$
Facilities Manager	80.00	0.00	0.00	0.00	0.00	0.00	80.00	- 0.00
Housekeeping	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Locker Room Attendant	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Maintenance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
CLUBHSE OPER. TOTAL	80.00	0.00	0.00	0.00	0.00	0.00	80.00	0.00
Superintendent	80.00	0.00	0.00	0.00	0.00	0.00	80.00	- 0.00
Asst. Superintendent	80.00	0.00	0.00	0.00	0.00	0.00	80.00	- 0.00
2nd Asst. Super.	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Mechanic	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Horticulturist	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Irrigation Tech.	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Spray Tech	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Golf Course Tech.	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Equipment Operators	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Summer Help	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
GOLF MAINT. TOTAL	160.00	0.00	0.00	0.00	0.00	0.00	160.00	0.00
Activities Director	80.00	0.00	0.00	0.00	0.00	0.00	80.00	- 0.00
Asst Act Dir/Aquatics Mgr	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Activities Leader	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Childrens Coordinator	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Pool Manager	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Activities Concierge	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Lifeguards	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Fitness Room Opening	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-
SWIM/ACTIVITES TOTAL	80.00	0.00	0.00	0.00	0.00	0.00	80.00	0.00
Tennis Pro	80.00	0.00	0.00	0.00	0.00	0.00	80.00	- 0.00
Assistant Tennis Pro	0.00	0.00	0.00	0.00	0.00	0.00	0.00	- #DIV/0!
Tennis Shop	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-
Tennis-Seasonal	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-
TENNIS TOTAL	80.00	0.00	0.00	0.00	0.00	0.00	80.00	0.00
Training	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-
TRAINING TOTAL	0.00	0.00	0.00	0.00	0.00	0.00	0.00	-
PAY PERIOD TOTAL	880.00	0.00	0.00	0.00	0.00	0.00	880.00	0.00

Your Club Name Here

FY-2017

DEPARTMENT: _____ Your Department Name Here

DATE: _____

Pay Period:	1	2	3	4	5	6	7	8	9	10	11	12	13
Ending Date:	1/9	1/23	2/6	2/20	3/5	3/19	4/2	4/16	4/30	5/14	5/28	6/11	6/25

Payroll Total (\$)

Budgeted Payroll

Over/(Under) Budget

Cum Over/(Under)

HOURS

Regular

Overtime

Impact of OT

Vacation

Sick

Other

Holiday

Total Hours

Budgeted Hours

Variance

Cumulative Variance

AVERAGE HOURLY WAGE

Actual

#DIV/0! #DIV/0!

Budgeted

Variance

#DIV/0! #DIV/0!

Cumulative Variance

#DIV/0! #DIV/0!

Pay Period:

Ending Date:

YTD

Payroll Total (\$)

0

Budgeted Payroll

Over/(Under) Budget

Cum Over/(Under)

HOURS

Regular

0.00

Overtime

0.00

Impact of OT

0.00

Vacation

0.00

Sick

0.00

Other

0.00

Holiday

0.00

Total Hours

0.00

Budgeted Hours

0.00

Variance

0.00

Cumulative Variance

0.00

AVERAGE HOURLY WAGE

Actual

#DIV/0!

#DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0!

Budgeted

#DIV/0!

Variance

#DIV/0!

#DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0! #DIV/0!

Cumulative Variance

#DIV/0!

Comments:

Department Head Signature

Your Club Name Here

FY-2017

DEPARTMENT: Club Master - Total of All Departments

DATE: _____

Pay Period:	1	2	3	4	5	6	7	8	9	10	11	12	13
Ending Date:	1/9	1/23	2/6	2/20	3/5	3/19	4/2	4/16	4/30	5/14	5/28	6/11	6/25

Payroll Total (\$)

Budgeted Payroll

Over/(Under) Budget

Cum Over/(Under)

HOURS

Regular

Overtime

Impact of OT

Vacation

Sick

Other

Holiday

Total Hours

Budgeted Hours

Variance

Cumulative Variance

AVERAGE HOURLY WAGE

Actual

#DIV/0! #DIV/0!

Budgeted

Variance

#DIV/0! #DIV/0!

Cumulative Variance

#DIV/0! #DIV/0!

Pay Period:	14	15	16	17	18	19	20	21	22	23	24	25	26	YTD
Ending Date:	7/9	7/23	8/6	8/20	9/3	9/17	10/1	10/15	10/29	11/12	11/26	12/10	12/24	

Payroll Total (\$)

Budgeted Payroll

Over/(Under) Budget

Cum Over/(Under)

0

SPHM Golf & Country Club

Paycheck Receipt Log

Club:	Date:	Pay Period:
Department:	Person Distributing Checks:	

Employee Name	Signature Verifying Receipt
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	

Signature of Person Distributing Checks

DEPARTMENT: Enter Your Department Name HereJanuaryBeginning
BalanceEXPENSE ACCOUNT: Enter the Expense Account Name HerePurchase
Amount

Date	Vendor	Item	Purchase Amount	Beginning Balance
1			0	1
2			0	2
3			0	3
4			0	4
5			0	5
6			0	6
7			0	7
8			0	8
9			0	9
10			0	10
11			0	11
12			0	12
13			0	13
14			0	14
15			0	15
16			0	16
17			0	17
18			0	18
19			0	19
20			0	20
21			0	21
22			0	22
23			0	23
24			0	24
25			0	25
26			0	26
27			0	27
28			0	28
29			0	29
30			0	30
31			0	31
32			0	32
33			0	33
34			0	34
35			0	35
36			0	36
37			0	37
38			0	38
39			0	39
40			0	40
41			0	41
42			0	42
43			0	43
44			0	44
45			0	45

Total this account

Club Resources International

Tools to Beat Budget Expense Log Summary

DEPARTMENT: Enter Your Department Name Here

FY: 2018

Starting Budget	Recruit Ads	Auto Expense	Bunker Sand	Computer Software	Drainage Catch Basin	Education	Equip Rental	Fertilizer	Fuel/Oil Lubricants	GC Accessories	Deere Lease	Toro Lease	Landscape	Licenses	Phones Radios	Mulch Pine Straw
January																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
February																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
March																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
April																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
May																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
June																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
July																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
August																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
September																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
October																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
November																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
December																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Club Resources International

Tools to Beat Budget Expense Log Summary

DEPARTMENT: Enter Your Department Name Here

FY: 2018

Starting Budget	Office Supplies	Pesticides	R&M Cart Path	R&M GC Bldgs	R&M GC Equip	R&M Irrigation	Sand/Gravel Drainage	Security	Seed/Sod Stolons	Sm Tools Equipment	Dues Subscript	GC Supplies	Travel Entertain	Top Phones	Dressing	Tree Rem Care
January																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
February																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
March																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
April																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
May																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
June																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
July																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
August																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
September																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
October																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
November																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
December																
Remainder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Club Resources International

Tools to Beat Budget Expense Log Summary

DEPARTMENT: Enter Your Department Name Here

FY: 2018

Starting Budget	Uniforms	Utilities	Utilities	Utilities	Utilities
	Rags/Mats	Irri Pumps	Maint Bldgs	Crse Shelter	Waste Rem
January					
Remainder	0	0	0	0	0
February					
Remainder	0	0	0	0	0
March					
Remainder	0	0	0	0	0
April					
Remainder	0	0	0	0	0
May					
Remainder	0	0	0	0	0
June					
Remainder	0	0	0	0	0
July					
Remainder	0	0	0	0	0
August					
Remainder	0	0	0	0	0
September					
Remainder	0	0	0	0	0
October					
Remainder	0	0	0	0	0
November					
Remainder	0	0	0	0	0
December					
Remainder	0	0	0	0	0

SPHM Golf & Country Club

Controlled Forms Sign-Out

Signature of Person Distributing Checks

DEPARTMENT:

SPHM Golf & Country Club

Special Order Form

Vendor Name:	Member Name:
Vendor Account #:	Member Account #:
Vendor Phone #:	Member Phone #:

Merchandise Ordered

Comments:	

Sales Rep:	Date Ordered:
Ship Date:	Charge Date:

Ordering Employee Name: _____ Date: _____

SPHM Golf & Country Club

Check Receipt Log

Club:

Day/Date:

	Payor	Amount of Check
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		
	Total	

Signature of Person Receiving Checks

SPHM Golf & Country Club

Return to Vendor Form

Vendor Name:		
Vendor #:	Reference PO #:	
<input type="checkbox"/> Debit <input type="checkbox"/> Credit <input type="checkbox"/> Return <input type="checkbox"/> Exchange		
Arranged with:	Date:	Vendor Return Code:

Merchandise

<input type="checkbox"/> Duplicate Shipment	<input type="checkbox"/> Cancelled Order	<input type="checkbox"/> Adjustment	<input type="checkbox"/> Credit	<input type="checkbox"/> Damaged
<input type="checkbox"/> Not Ordered	<input type="checkbox"/> Over Shipped	<input type="checkbox"/> Return	<input type="checkbox"/> Shortage	<input type="checkbox"/> Other
Comments: <hr/> <hr/>				

Employee Signature: _____ Date: _____

Section I

	Column A		Column B
Line 1	Bank Statement Date		Previous Pd End Date
Line 2	Bank Balance		Beginning Ledger Balance
Line 3	I/T Deposits	0.00	Disbursements
Line 4	Outstanding Checks		Deposits
Line 5			C/C Equip lease
			AMEX charges
			MC/Visa Charges
			Discover charges
			Returned Checks
			Service Charges/Fees
			cc mach equip shipping
Line 6	Column Total	\$ -	Ending Ledger Balance
			\$ -
			Proof \$ -

Section II

In Transit Deposits:

Controller Signature/Date

Reviewer Signature/Date

SPHM Golf & Country Club**Cashier Overage/Shortage Report**

Club: _____

Month/Year: _____

Day	Dept.	Cashier	POS Receipts	Cashier Deposit	Over (Short)	Cum Total
1					0.00	0.00
2					0.00	0.00
3					0.00	0.00
4					0.00	0.00
5					0.00	0.00
6					0.00	0.00
7					0.00	0.00
8					0.00	0.00
9					0.00	0.00
10					0.00	0.00
11					0.00	0.00
12					0.00	0.00
13					0.00	0.00
14					0.00	0.00
15					0.00	0.00
16					0.00	0.00
17					0.00	0.00
18					0.00	0.00
19					0.00	0.00
20					0.00	0.00
21					0.00	0.00
22					0.00	0.00
23					0.00	0.00
24					0.00	0.00
25					0.00	0.00
26					0.00	0.00
27					0.00	0.00
28					0.00	0.00
29					0.00	0.00
30					0.00	0.00
31					0.00	0.00

Manager's Signature/Date: _____

SPHM Golf & Country Club

Bank Receipt Log

Club: _____

Month/Year: _____

Manager's Signature/Date:

SPHM Golf & Country Club

Check Request

Vendor Name:	Department:
Invoice #:	Date Required:
Check Amount: \$	Reason:

Charge to:

Account #	Item Description	Amount

Pay To:

Vendor Name:	_____
Address:	_____
City/State/ZIP:	_____

Comments:	

Requested by: _____ Date: _____

Out-of-line cost of goods sold may be the result of a variety of problems.

Analyzing out-of-line cost of goods sold is a process of elimination to pinpoint those processes or actions contributing to the problem.

The Cost of Goods Formula is:

Cost of Goods Sold = Beginning Inventory + Purchases - Ending Inventory (+ or -) Transfers & Adjustments

Cost of Goods Sold Analysis Checklist

Yes | No

Accurate Inventories (beginning and ending)

- 1 Are physical counts correct?
- 2 Were all items counted?
- 3 Were extensions of number of items x unit cost accurate?
- 4 Are inventories costed consistently from period to period (LIFO, FIFO, Avg Unit)?

Purchases

5 Were all invoices received and correctly coded?

Receiving

- 6 Were all deliveries received and verified?
- 7 Were received items counted or weighed?
- 8 Were receiving records matched to invoices?
- 9 Were any shortages or back-orders noted?

Transfers

10 Were all transfers to and from other department properly recorded?
11 Were all transfers reported to the Accounting office?

Revenues

12 Were all revenues recorded?

Consumption (F&B)

- 13 Was sales mix analyzed (high levels of low margin sales will increase CoGS)?
- 14 Was the pricing of all items in accordance with the target CoGS?
- 15 Were standardized recipes in use and followed by prep staff?
- 16 Were portion sizes correct and continually monitored?
- 17 Were promos/comps/adjustments accounted for at cost?
- 18 Were employee meals accounted for at cost?

Security

- 19 Were inventories properly secured at all times?
- 20 Are vendors allowed into storage areas unaccompanied?
- 21 Are supervisors vigilant against petty pilferage?
- 22 Is there a designated employee entrance?

Food Spoilage

23 Was any spoiled food accounted for at cost?

Comments:

SPHM Golf & Country Club**Cost of Goods Sold Analysis**

Club:	Dept:												FY:	2017
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Annual	
Beginning Inventory	74,358.24	72,698.27											73,528.26	
Purchases	10,481.32	12,465.32											11,473.32	
Transfers/Adjustments	(128.94)	248.32											59.69	
Ending Inventory	72,698.27	70,325.85											71,512.06	
Cost of Goods Sold	12,012.35	15,086.06	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	13,549.21	
Sales	18,457.26	19,453.21											18,955.24	
CoGS Percentage	65.1%	77.6%	#DIV/0!	71.5%										
Inventory Turns	0.25	0.27	#DIV/0!	0.26										

Multiple Expense Coding Sheet

Department: GC MaintenanceVendor: Acme Wholesale Products
Tax Total \$142.10Invoice #: 08-14307
Ship Total \$39.50Inv Date: 22-Aug-16
Inv Total \$2,286.72Expense Code: 490-214Category: Fertilizer

Line Item(s)
Hydro-Grow 420
10-20-40 Mix

Line Item Cost
1,342.78
642.50
1,985.28

Subtotal

Expense Code: 490-222Category: Fuel, Oil, Lubricants

Line Item(s)
2 cases 30w Oil

Line Item Cost
79.89
79.89

Subtotal

Expense Code: 490-538Category: Seed/Sod/Stolons

Line Item(s)
100 lbs Fescue seed

Line Item Cost
39.95
39.95

Subtotal

Expense Code: Category:

Line Item(s)

Line Item Cost
0.00

Subtotal

Exp Code
490-214
490-222
490-538
0

Expense Category
Fertilizer
Fuel, Oil, Lubricants
Seed/Sod/Stolons
0

Category Cost
1,985.28
79.89
39.95
0.00
2,105.12

Subtotal

% Allocation
94.3%
3.8%
1.9%
0.0%
2,105.12

Allocated Tax
134.01
5.39
2.70
0.00
142.10

Allocated Shipping
37.25
1.50
0.75
0.00
39.50

Category Total
2,156.54
86.78
43.40
0.00
2,286.72

Invoice Total

142.10

39.50

2,286.72