



NAME OF GROUP:

TIME PERIOD:

Opening Balance in Account:

€

Income 2024

Parent & Toddler Fees 2024	
Fundraising 2024	
Grants Rec'd in 2024	
Offaly County Childcare Committee	
Other (please specify)	

Total

€

Expenditure 2024

Rent	
Heating	
Electricity	
Insurance	
CE Approved Toys and Equipment	
Children's Snacks and Refreshments	
Activities (please specify)	
Training	
Other items (give details below)	

Total

€

Closing Balance:

€

Signed: _____
Treasurer/Committee Member

Date:

Signed: _____
Committee Member

Date: