



ASCAP

# 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))

Total: \$ 

### MECHANICAL MUSIC (See Schedule II of Rate Schedule)

#### AUDIO MUSIC SUPPLIER

Was Mechanical Music furnished to an ASCAP Licensed Supplier?

☐ Yes ☐ NoSupplier 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/VCRContact Person & Title: Phone Number:  -  -  Ext: Fax Number:  -  - Email: Website: 

I certify the above information is true and correct.

Dated:  /  / Signature: