MONTHLY MOVIE EXHIBITION AND ATTENDANCE RECORD
FOR PAID AND FREE ADMISSION SHORE SITE

TO: NAVY MOTION PICTURE SERVICE
NAVY PERSONNEL COMMAND (NPC-650)
5720 INTEGRITY DRIVE
MILLINGTON TN 38055-6510
(COM) 901-874-6534 FAX 901-874-6831
DSN 882-6534 FAX 882-6831
e-mail: Shannon.Armbruster@persnet.navy.mil

NMPS USE ONLY
LOG IN BY_____DATE_____
DATA ENTRY BY_____DATE_____

REPORT IS DUE TO NMPS NLT THE 15th OF THE MONTH FOLLOWING THE REPORTING MONTH.

FROM:

REPORTING MONTH AND YEAR

THEATER NAME:
ACCOUNT #

COM PHONE:
COM FAX:

A	B	C	D	E	F	G	H	I	J
PLAY	***PROGRAM***	***FEATURE TITLE***	***ADMISSION PRICE***			***ATTENDANCE***			***PROGRAM***
DATE	***#***		***AD***	***ADULT***	***CHILD***	***AD***	***ADULT***	***CHILD***	***REVENUE***
									$0.00
									$0.00
									$0.00
									$0.00
									$0.00
									$0.00
									$0.00
									$0.00
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Rev. 09/00

REPORTING MONTH AND YEAR

THEATER NAME:
ACCOUNT #

A	B	C	D	E	F	G	H	I	J
PLAY	*PROGRAM*	*FEATURE TITLE*	*ADMISSION PRICE*			*ATTENDANCE*			*PROGRAM*
DATE	*#*		*AD*	*ADULT*	*CHILD*	*AD*	*ADULT*	*CHILD*	*REVENUE*
									$0.00
									$0.00
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			THIS PAGE TOTAL			0	0	0	$0.00

Continuation Page

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REPORTING MONTH AND YEAR

THEATER NAME:
ACCOUNT #

A	B	C	D	E	F	G	H	I	J
PLAY	*PROGRAM*	*FEATURE TITLE*	*ADMISSION PRICE*			*ATTENDANCE*			*PROGRAM*
DATE	*#*		*AD*	*ADULT*	*CHILD*	*AD*	*ADULT*	*CHILD*	*REVENUE*
									$0.00
									$0.00
									$0.00
									$0.00
									$0.00
									$0.00
									$0.00
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									$0.00
			THIS PAGE TOTAL			0	0	0	$0.00
			GRAND TOTAL			0	0	0	$0.00

CERTIFICATION

Upon submission of this report to Navy Motion Picture Service, I hereby certify that the accounting and statistical data herein are accurate, complete and in agreement with the books of account and records of the Recreation Fund and motion picture operation.

Report Preparer:_____

Com Phone: _____

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Rev. 09/00