

**OREGON STATE TRAPSHOOTING ASSOCIATION (OSTA)
Registered Shoot Recap Form**

Club Name: _____ Dates: _____ to _____

Club Cashier: _____

Phone: _____ Email: _____

OSTA TARGET FEES - 2 cents per target

*Program targets _____ targets x \$0.02 = _____

*Multiplex targets _____ targets x \$0.02 = _____

*Multiplex Sub-Gauge _____ targets x \$0.02 = _____

*ODC fees _____

****INCLUDE COPY OF 3S Finance Report, Multiplex forms, and ODC forms**

TOTAL TARGET FEES (ALL EVENTS) _____

****MAGNUM OPTION FEES**

Event No. _____ # of entries _____ @ \$12.00 each = _____

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Event No. _____ # of entries _____ @ \$12.00 each = _____

Event No. _____ # of entries _____ @ \$12.00 each = _____

Event No. _____ # of entries _____ @ \$12.00 each = _____

TOTAL MAGNUM FEES DUE _____

****ATTACH COPIES OF ALL 3S PERPETUAL PURSE REPORTS
IF PURSES ARE WON INCLUDE ADDRESS AND PHONE
NUMBER OF WINNER(S)**

TOTAL DUE _____
(PAYABLE TO OSTA)

**MAIL CHECK TO: OSTA
PO BOX 2083
LEBANON, OR 97355**

EMAIL ALL FORMS TO sjbrewer40@gmail.com

Questions: contact Sue Brewer, Treasurer - (541) 258-8766 sjbrewer40@gmail.com