This Form is to be completed, signed, and returned to the ticket office no later than 1 week prior to the start of the sale.

Event Data Form							
Club/Organization			Government: Graduate Student Association				
Event Name		Event Date Start Time					
Revenue AccountLine #			(Account whe	ere funds w	ill be deposited	after the	event closes)
			V	/ill this Pat	ron Type ticket b	e sold:	
Patron Type (e.g., SA student, SBA student, general public)	Qty	Face Value	Fees FV >= \$100, 4% FV < \$100, 7%	Total Price	Box Office	On- Site	Online
Example	XXX	\$10	% \$	\$10.70	YES	NO	YES
Total Tickets				Tota	al Capacity f	or Venu	ne
I. Tickets per UB ID				/. Clas	sification: Selec	t One	
II. Sales Dates Start	Т	imo:			Fundraiser (Inten	ded for Pro	,
ii. Sales Dales Start	'	iiiie			`	ntended fo	r Profit)
End	T	ime:		_	ription, including e		
III. Venue  Name				Evon Bood	mpalan, malaanig c	Work Hours	
IV. Distribution E-Ticket- Ticket Office	Pick-Up:	Club T	icket Office	Code/Link/E-	-Transfer: Club	Ticket Of	fice Mail: \$
Do you have a PO for this eve	nt? PO:	#		_			
On-Site Sell Timesstaff member PLUS transporta					staff will be assess rnment)	sed a fee of	\$13.70/ hr per
All Risk Assessments and I	Extra Insura	ance Sho	uld be coordin	ated throug	gh your Student	Governme	nt
Club Rep (Print Name):       Club Rep Signature:         Phone       E-Mail:         Government Officer Signatures:       1)							
Government Officer Signatures: 1) 2)							
Government Officers Signat							
Please list persons that will ne	ed access to	o view the	progress of the	event (num	nber of tickets sold	, etc)	
Name: UI	BIT:		Name:		UBIT:		

By signing this form, all parties agree to adhere to the information supplied therein and the guidelines for student organizations. The club representative whose signature is affixed to this document must furnish changes to any of the supplied information in writing.