

EVENT FORM BUDGET STATEMENT

EVENT _____ VENUE _____

DATE _____ CHAIR(S) _____

EXPENDITURES

FOOD \$ _____
 WINE/LIQUOR \$ _____
 PLACECARDS \$ _____
 ROOM DEPOSIT \$ _____
 FAVORS \$ _____
 FLOWERS/DECOR \$ _____
 OTHER _____ \$ _____
TOTAL EXPENSES \$ _____

INCOME

RESERVATIONS \$ _____
 VENDORS* \$ _____
 RAFFLE TICKETS \$ _____
 50/50 SPLIT \$ _____
 BASKET RAFFLE \$ _____
 CASH DONATIONS \$ _____
 OTHER _____ \$ _____
TOTAL INCOME \$ _____

DEPOSITS

CHECKS \$ _____
 CASH \$ _____
TOTAL \$ _____

PROFIT

TOTAL INCOME \$ _____
 - EXPENDITURES \$ _____

TOTAL PROFIT \$ _____

LEAVE BLANK ANY CATEGORY NOT APPLICABLE TO YOUR EVENT. * IF VENDORS APPLY, LIST TOTAL INCOME ON FRONT OF FORM BUT LIST NAMES OF INDIVIDUAL VENDORS AND THEIR CONTRIBUTIONS SEPARATELY ON BACK.

PREPARED BY _____ (PRINT)

_____ (SIGNATURE)