

FUNDRAISING EVENT WORKSHEET

Committee Members:	
Name of Event:	
Date of Event:	
Location of Event and Cost:	
Contact Person for Venue/Event:	
Insurance Required (if any)	
Liquor (if any)	
Capacity (if any)	
Number of Tickets/Product to be Sold :(if any)	
Original Cost per ticket/product:	
Cost per ticket/product to sell:	
Potential Profit:	
Anticipated Portion to General Funds: (if any)	
Anticipated Portion to Individual Funds: (if any)	
Required Man Hours: Per Member:	
Other:	