SUBMITTAL FORM FOR FUNDRAISING EVENT

NAME OF EVENT: _____
DATE: _____
EVENT COORDINATORS: _____
SUB-COMMITTEE: _____
PURPOSE: _____

_____

PROPOSED INCOME: _____
PROPOSED EXPENSE: _____
PROPOSED NET: _____
NUMBER OF VOLUNTEERS/BOARD MEMBERS NEEDED: _____

COMMUNICATION/PR NEEDS:

_____
_____
_____
_____
_____

MATERIALS NEEDED:

_____
_____
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_____

JOBS/DUTIES:

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BOARD APPROVAL DATE: