

AREA COUNCIL - PROPOSED EVENT BUDGET (REQUEST FOR FUNDS)

DATE SUBMITTED:	_____
AREA COUNCIL:	_____
CHAIR:	_____ (print name)

WHAT (EVENT PLANNED): _____

WHERE (EVENT LOCATION): _____

WHEN (DATE OF EVENT): _____

EVENT CONTACT: _____ (print name)

PHONE NUMBER: _____ **EMAIL:** _____

ESTIMATE NUMBER OF ATTENDEES: _____

ESTIMATED COST PER ATTENDEE: \$ _____

PROPOSED EXPENSES	
ITEM DESCRIPTION	COST
TOTAL FUNDS REQUIRED:	\$ _____

DATE FUNDS REQUIRED BY: _____

MINUTES/MOTION ATTACHED **NOTE:** Attach a copy of the minutes and/or motion

LATEST BANK STATEMENT ATTACHED approving this event & a copy of the latest Bank Statement.

APPROVED BY EVENT CONTACT: _____ (signature required)

APPROVED BY TREASURER: _____ (signature required)

This form must be submitted to the Executive Secretary-Treasurer at least **FOURTEEN (14) DAYS PRIOR** to the fund requirement date in order to allow for administrative processes.

Late submissions (14 days prior notice) will result in late payment of funds to the above noted Area Council.

INCOMPLETE FORMS/DOCUMENTATION WILL BE RETURNED TO THE AREA COUNCIL FOR COMPLETION AND RESUBMISSION.

AREA COUNCIL - ACTUAL EXPENDITURE FORM

DATE SUBMITTED:	_____
AREA COUNCIL:	_____
CHAIR:	_____ (print name)

WHAT (EVENT PLANNED): _____

WHERE (EVENT LOCATION): _____

WHEN (DATE OF EVENT): _____

EVENT CONTACT: _____ (print name)

PHONE NUMBER: _____ EMAIL: _____

ACTUAL NUMBER OF ATTENDEES: _____

TOTAL MONEY COLLECTED FROM ATTENDEES: \$ _____

ACTUAL EXPENSES	
ITEM DESCRIPTION	COST
TOTAL EXPENSES:	\$ _____

ADVANCED: \$ _____ (from HQ/deposit in Bank Account)

COLLECTED: \$ _____ (from Attendees, 0 if FREE/ deposit in Bank Account)

EXPENDED: \$ _____ (cheques withdrawn from Bank Account, attach receipts)

BALANCE (PLUS OR MINUS): \$ _____ (advanced + collected - expended)

Plus (+) = under spent: additional funds left in Bank Account for future events

Minus (-) = over spent: additional Bank Account funds were used for this event

TICKET INVENTORY:	BALANCE FORWARD	<input type="text"/>	
PLUS:	PURCHASES	<input type="text"/>	
MINUS:	SOLD/GIVEN	<input type="text"/>	(if given away attach list/signatures)
	REMAINING BALANCE	<input type="text"/>	(report on a new form when sold/given)

APPROVED BY EVENT CONTACT: _____ (signature required)

APPROVED BY TREASURER: _____ (signature required)

Please attached ALL original receipts.

This form must be submitted to the Executive Secretary-Treasurer within **FOURTEEN (14) DAYS** after the event.

FAILURE TO REPORT AND ATTACH ORIGINAL RECEIPTS WILL DELAY FUTURE RELEASE OF FUNDS UNTIL SUCH TIME AS PROPER DOCUMENTATION IS RECEIVED AND VERIFIED.