

Chapter 299 Event Planning Guide

Project Name

Submission Date

Date of Event

Event Location

Brief Description of Planned Event:

Estimated Gross Revenue (if applicable)

*

Itemized expense breakdown:

1)	<input type="text"/>	<input type="text"/>
2)	<input type="text"/>	<input type="text"/>
3)	<input type="text"/>	<input type="text"/>
4)	<input type="text"/>	<input type="text"/>
5)	<input type="text"/>	<input type="text"/>
6)	<input type="text"/>	<input type="text"/>
7)	<input type="text"/>	<input type="text"/>
8)	<input type="text"/>	<input type="text"/>
9)	<input type="text"/>	<input type="text"/>
10)	<input type="text"/>	<input type="text"/>
11)	<input type="text"/>	<input type="text"/>
12)	<input type="text"/>	<input type="text"/>

Total Budget Request

Chairman making application

Email

Phone #1

Board Approval Date

Phone #2

Membership Approval Date

Witness Signature

Witness Signature

Copies of approved Event Guides to be kept by Secretary & Treasurer (one each)

Form Date 04/2013