

Belle Haven Women's Club
Event Report Form

Event: _____

Event Date: _____ Location: _____

Co-Chairs: _____

Number of Volunteers: _____

Number of Attendees (expected and final count): _____

Fee to Attend:

Member: _____ Couple: _____ Guest: _____

Finances:

Budget: _____; plus

Revenue: _____; minus

Expenses: _____; equals

Net Profit/(Loss): _____

Key Take-Aways:

Food: _____

Wine/Beer/Liquor: _____

Staffing: _____

Decoration: _____

Set-Up: _____

Equipment and Rental Needs: _____

Other Notes, Advice, Ideas for Next Year: _____

Submitted by:

Date:

Treasurer Will Attach Event Revenue/Expense Summary