

**All AMERICAN LODGE # 001**

**Report of Special Event Fund Raiser for:**

**Committee**

**COMPLETED BY CHAIRMAN AND TURNED IN WITHIN TWO WEEKS** Check [ ] Initial [ ] Follow Up Report

Held @ \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_ Weather Conditions: \_\_\_\_\_ Temp. \_\_\_\_\_

Describe Event? \_\_\_\_\_ Benefit for: \_\_\_\_\_ Catered Event: Yes / NO

Chairman Name: \_\_\_\_\_ Facility Used: \_\_\_\_\_ Name of Band or Other

Entertainment: \_\_\_\_\_ Will You Do Follow Up Report, if needed? Yes / No

**INCOME** (STATE Budget Line Number: \_\_\_\_\_)

Did You Receive An **Advance?** If Yes, How Much? ..... = \$ \_\_\_\_\_

No of Event Tickets Sold: \_\_\_\_\_ @ \$ \_\_\_\_\_ Per Ticket..... = \$ \_\_\_\_\_

No of Raffle Tickets Sold \_\_\_\_\_ @ \$ \_\_\_\_\_ Per Ticket..... = \$ \_\_\_\_\_

Other Income Describe: \_\_\_\_\_ .... = \$ \_\_\_\_\_

Other Income Continued: \_\_\_\_\_ .... = \$ \_\_\_\_\_

\_\_\_\_\_

**(A) TOTAL INCOME:**..... = \$ \_\_\_\_\_

**EXPENSES** (STATE Budget Line Number: \_\_\_\_\_)

Band or Other Entertainment: ..... = \$ \_\_\_\_\_

Raffle / 50/50 Expenses: (Printing, other, etc.) ..... = \$ \_\_\_\_\_

Food (including Coffee, Tea, Soda, etc.) ..... = \$ \_\_\_\_\_

Liquor \$ \_\_\_\_\_ Beer \$ \_\_\_\_\_ Other \$ \_\_\_\_\_ ..... = \$ \_\_\_\_\_

Paper & Plastic Supplies ..... = \$ \_\_\_\_\_

Catered Expense, If any?..... = \$ \_\_\_\_\_

Other (List- Use separate sheet, if needed) \_\_\_\_\_ ... = \$ \_\_\_\_\_

\_\_\_\_\_

**ADVANCE, IF ANY**..... = \$ \_\_\_\_\_

**(B) TOTAL EXPENSES:**(Attach Receipts for State Secretary)..... = \$ \_\_\_\_\_

**NET PROFIT** (Total Income (A) Minus Total Expenses (B))..... = \$ \_\_\_\_\_

**VOLUNTEER TIME SHEET**

| Date(s) | Brief Description of Volunteer Duties | Number of Elk Member(s) Volunteer(s) | Number of Non-Elk Volunteer(s) | Number of Hours worked ex. 10.5 | Number of Miles Driven ex. 50.5 | Actual Out of Pocket Expense Not Reimbursed or Donated |
|---------|---------------------------------------|--------------------------------------|--------------------------------|---------------------------------|---------------------------------|--|
|         |                                       |                                      |                                |                                 |                                 |  |
|         |                                       |                                      |                                |                                 |                                 |  |
|         | <b>TOTALS</b>                         |                                      |                                |                                 |                                 |  |

**Original to: Lodge Secretary (with receipts attached); Copies to: Chairman Trustees ;Audit Chairman; Your Committee Records.**

x \_\_\_\_\_  
Signature of Chairperson Date

