

# Event Accountability Form

Committee Name \_\_\_\_\_ Event Name \_\_\_\_\_  
Scheduled Date \_\_\_\_\_

**Actual**

**Budgeted**

## Revenue

Tickets	_____	_____
Food	_____	_____
Beverages	_____	_____
Merchandise	_____	_____
Miscellaneous	_____	_____
<b>Total Revenue</b>	\$ _____	\$ _____

## Expenses

Rent	_____	_____
Food	_____	_____
Beverages	_____	_____
Merchandise	_____	_____
Decorations	_____	_____
Miscellaneous	_____	_____
<b>Total Expenses</b>	\$ _____	\$ _____

<b>PROFIT/LOSS</b>	\$ _____	\$ _____
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Approved on \_\_/\_\_/\_\_  
Motion #