

ACTIVITY BUDGET PLANNING SHEET

This form must be processed for any District or Council Event. Fill out in triplicate – all copies to be submitted for approvals – at least **60 days in advance** of activity or prior to the ordering of any items.

Completed Final Budgets must be turned in within 48 hours of event completion.

District/Council: _____ Name of Event: _____

Date of Event: _____ Budget Submitted by: _____

<u>INCOME ITEM</u>	<u>DESCRIPTION</u>	<u>BUDGET</u>	<u>ACTUAL</u>
Fees	_____	_____	_____
Other Income	_____	_____	_____
	_____	_____	_____
TOTAL INCOME		_____	_____

<u>EXPENSE ITEM</u>	<u>DESCRIPTION</u>	<u>BUDGET</u>	<u>ACTUAL</u>
Program Supplies	_____	_____	_____
Patches	_____	_____	_____
Postage/Printing	_____	_____	_____
Sites & Facilities Rental	_____	_____	_____
Food	_____	_____	_____
Recognition Awards	_____	_____	_____
Other Expenses:	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
Reserve for Contingency	_____	_____	XXXXXXXXXXXXXXXXXX

TOTAL EXPENSE _____

BALANCE _____

<u>PRIOR APPROVAL</u>	<u>DATE</u>	<u>FINAL APPROVAL</u>	<u>DATE</u>
Supervisor:	_____	_____	_____
Dist. Exec:	_____	_____	_____
Event Chair:	_____	_____	_____