



AUBURN UNIVERSITY

FOUNDATION

OFFICE OF DEVELOPMENT ACCOUNTING

FORM INSTRUCTIONS FOR APPROVAL OF FUND RAISING EVENT

This completed form is required before an activity code can be assigned.

SECTION I - EVENT INFORMATION:

1. Enter the official name of the event.
2. Enter today's date which is the date of the request.
3. Enter the actual date that the event is to be held.
4. Enter the anticipated physical location of the event.
5. Enter the name of the university school, college, or other division/unit hosting the event.
6. Enter the type of event (Golf Tournament, Silent Auction, Gala, etc.)
7. Enter the purpose for the net proceeds from the event. Please specify if is for an Endowment.
Multiple purposes can only be specified if exact amounts of percentages are specified upfront.
8. Provide a detailed description of the event. Include who the target market is.

SECTION II- REVENUE INFORMATION

Give the best estimate as to the expected revenue if it is a first time event. If the event is an annual function, prior year information can be used in estimating revenue adjusting for any changes anticipated. Indicate changes made that will affect the change in revenue. *For example, tickets will be priced at X% or \$X more per person; thereby increasing revenues. Another example is, last year the event was marketed to Alumni of AU Nursing where as this year the event is being marketed to AU and AUM Schools of Nursing's alumni; thereby increasing revenues.*

Give your best estimate as to the expected expenses if it is a first time event. If the event is an annual function, prior year information can be used in estimating expenses adjusting for any changes anticipated. Indicate changes made that will affect the change in expenses. *For example, last year goody bags cost \$100 per person and this year the goody bags will not be given as a benefit; thereby reducing costs. Another example is, last year the golf course rental cost \$250 per person and the golf course is increasing the fee per person to \$375; thereby increasing costs.*

SECTION III- REQUEST AND APPROVAL INFORMATION

1. The form must have a contact person and provide their e-mail and telephone number.
2. The form must be signed requesting the even by the Development Contact, usually the

Development Coordinator.

3. The form must be approved by the VP for Development or his/her delegate. Please attach the prior year revenues and expenses showing net gain/loss.
4. Once approved by the VP or the delegate, the form will be returned to the Development contact.
5. The Development contact will then attach the event brochure as well as the schedule of payments/benefits breakdown and forward to Development Accounting.
6. Once received by Development Accounting and the Activity Code has been established, the contact person listed on the form will be sent an email notification that the event has been added to Banner and Ascend. The contact will be given the Banner FOP, and the Activity Code as well as the Ascend account number. At this point, vendor vouchers, journal entries and collection reports may be processed.

OFFICE OF DEVELOPMENT

Request for Approval of Fund Raising Event

Section I

Name of Event: **1** _____

Today's Date: **2** _____

Proposed Date/Location: **3** _____ **4** _____

School/College/University Division: **5** _____

Type of Event: **6** _____

Proceeds to be Used For: **7** _____

Is this the Initial year of the event? Yes No (If No, attach last year's Final Report)

DESCRIPTION (Please provide a detailed description of activity)

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Section II

Estimated Revenue

Tickets, Registrations (\$ _____ per person) (\$ _____ per table of _____)

Sponsorships _____

Extras (Mulligans, Drink Tickets) _____

Auction Proceeds Live Silent _____

Event Totals

\$ _____

_____ \$ _____

Estimated Costs

Invitations, Brochures _____

Photography _____

Caterer, Food, Beverages _____

Facilities Rental _____

Equipment Rental _____

Entertainment _____

Decorations _____

Gift Bags _____

Benefit Per Donor

\$ _____

Total: _____

Subtotal \$ _____ \$ _____

Anticipated Amount to Be Produced by Event \$ _____

Estimated # of Participants _____

Section II

Prepared By: **1** _____

Requested By: **2** _____ Department _____ Contact Name _____ E-Mail _____ Phone _____

Approved: **3** _____ Authorized Development Contact _____ **3** _____ Date _____

Associate VP for Development _____ Date _____ VP for Development _____ Date _____

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For Routing Instructions refer to the link:

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Development Accounting Office Only

Reviewed: _____ Date: _____

FOPA: _____

ASCEND Account: _____