

OFFICE OF DEVELOPMENT

Request for Approval of Fund Raising Event *Hqt o 'C+

Name of Event: _____

Today's Date: _____

Proposed Date/Location: _____

School/College/University Division: _____

Type of Event: _____

Proceeds to be Used For: _____

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)

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

Prepared By: _____

Department Contact Name E-Mail Phone

Requested By : _____

Authorized Development Contact Date

Approved: _____

AVP for Development Date VP for Development Date

Refer to Routing Instructions: <http://www.auburn.edu/administration/oadss/devacct/pdf/approvalinstructions.pdf>

Development Accounting Office Only

Reviewed: _____ Date: _____

FOPA: _____

ASCEND Account: _____