

**ITALIAN-AMERICAN CLUB OF LIVONIA
BUDGET – EVENT PREVIEW**

NAME OF EVENT: _____ **DATE:** _____

DATE REPORT SUBMITTED: _____

A. REVENUE RECEIPTS : (list all sources of revenue such as admission tickets, raffle tickets, advertising, Food sales, etc. Show units and price on admission tickets only).

MEMBER TICKETS: _____ PRICE: _____ \$ _____

NON MEMBER TICKETS: _____ PRICE: _____ \$ _____

CHILD TICKETS: _____ PRICE: _____ \$ _____

TOTAL TICKETS SALE: \$ _____

OTHER REVENUE: _____ \$ _____

TOTAL REVENUES: \$ _____

B. COSTS EXPENDITURES: (List all expenses)

<u>SUPPLIER</u>	<u>ITEM</u>	<u>AMOUNT</u>
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IABC: _____	_____	_____
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BAND: _____	_____	_____
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FLOWERS: _____	_____	_____
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PRINTING: _____	_____	_____
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MISC.: _____	_____	_____
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_____	_____	_____
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TOTAL EXPENDITURES:	\$ _____
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NET PROFIT: (OR)	\$ _____
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NET LOSS:	\$ _____
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CHAIRPERSON : _____