

Event Budget Closeout Summary

Event Name: _____

Event Date: _____

Income

Income Source	Amount
Ticket Sales/Registrations	\$__
Donations Received	\$__
Sponsorships	\$__
Merchandise Sales	\$__
Other Income	\$__
Total Income	\$__

Expenses

Expense Category	Amount
Venue/Facility Rental	\$__
Supplies	\$__
Decorations	\$__
Food & Beverage	\$__
Entertainment/Program Costs	\$__
Marketing/Printing	\$__
Awards/Patches	\$__
Other Expenses	\$__
Total Expenses	\$__

Event Results

Total Income: \$__

Total Expenses: \$__

Net Profit/(Loss): \$__

Event met or exceeded budget projections.

Event did not meet budget projections.

Notes & Lessons Learned

Event Director Signature: _____

Date: _____