Entertainment _____

Cultural _____

Athletic _____

EVENT: _____

CHAIRMAN: _____ PHONE: _____

DATE: _____ TIME: _____

FACILITIES USED:

Dining Room _____ Bar _____

Kitchen _____ Diamond #1 _____

Kitchen Bar _____ Diamond #2 _____

Gym _____ Concession _____

Gym Bar _____ Beer Stand _____

EXPENSES:

	Amount
TOTAL	

INCOME:

	Amount
TOTAL	

NET PROFIT _____