

PIA Event / Activity Summary

Committee _____

Date of Event _____

Chairperson(s)	Approximate Number of Hours worked by Chairperson
_____	_____
_____	_____

Expenses	Donated Items or Services Estimated Value
Food \$	\$
Decorations \$	\$
Advertising \$	\$
Supplies \$	\$
Services \$	\$
TOTAL \$	TOTAL \$

Volunteers
 Number of Volunteers: _____ Too Few ? Too Many ?

Names of Volunteers

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Set-Up

Did your event require setting up any tables, chairs, booths, etc ? _____
(If yes, please attaché diagram and copy of Event Planner)

Any Suggestions for next year's set up?

Vendors

Please list names and phone number of vendors used:

Do you have any comments of suggestions regarding vendors?

Suggestions for Next Year...

What Worked ?

What didn't work ?

It would have been nice if someone had told me...