



OCETFO Cost of Event Form

Name of Committee: _____

Event Date: _____

Name of Organizer(s): _____

Event Name: _____

Location: _____

Presenter: _____

of Registrants: _____

of Attendees: _____

ITEM		DETAILS	BUDGET \$	ACTUAL \$
Food & Drink				
Presenter (including honarium and/or gift)				
Prizes & Giveaways				
Resources (e.g. books)				
Other (e.g. accommodations)				
TOTAL:			\$	
Funding from other sources e.g. Incentive Funding:			\$	

Total Cost to OC ETFO Committee:

\$