

Granger PTO After Project Report

Committee: _____ Today's Date: _____

Event/Activity: _____

Location: _____

Contact Person: _____ Phone: _____

Event Date(s): _____ Event Time(s): _____

Approx # Attended: _____ # Volunteers Needed: _____

Brief description of event/activity: _____

Budgeted Amount: \$ _____

Income \$ _____

Total Costs \$ _____

Over/Under Amount \$ _____

Suggestions: _____

Coordinator Signature: _____

Please retain one copy for your event binder and also give copies to the PTO president and treasurer before the next PTO meeting.