**Please type all expenses and submit to the SGA Office, Perkins Game Room 009E.**

Organization:

Date funds were requested for: Fall / Spring Year:

Contact person name:

PSU Email: Phone:

Club Advisor name:

PSU Email: Phone:

Submission Date:



# STEPS FOR BUDGET ANALYSIS

1. On the next page, copy and paste a table for each program your club has hosted or attended. An itemization table for each of the items bought is under the program table. Please add additional rows to the item table for events that required multiple items. Note\*\* gas is calculated at 55cents per mile.

2. Explain how the program/event went. Any recommendations for future events of this sort? Please be as specific as possible.

3. Provide a paid invoice/receipt whenever possible. For example, if your club required a bus, provide an paid invoice from the bus company to support the cost.

**Please add more tables or rows as needed.**

|  |  |  |
| --- | --- | --- |
| **Program Name:** |  | **Program Outcome and Recommendations:** |
| **Program Location:** |  |
| **Number of Attendees:** |  |
| **Total Funds Requested for Program:** |  |
| **Total Funds Used for Program:** |  |

Please list the materials, prices, and item location for the requested event amount below:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Item Name | Previous Unit Price | Quantity Requested | Amount Requested | Actual Unit Price | Quantity  Used | Amount Expended | Supplied By |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Program Name:** |  | **Program Outcome and Recommendations:** |
| **Program Location:** |  |
| **Number of Attendees:** |  |
| **Total Funds Requested for Program:** |  |
| **Total Funds Used for Program:** |  |

Please list the materials, prices, and item location for the requested event amount below:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Item Name | Previous Unit Price | Quantity Requested | Amount Requested | Actual Unit Price | Quantity  Used | Amount Expended | Supplied By |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

Sample

**Please add more tables or rows as needed.**

|  |  |  |
| --- | --- | --- |
| **Program Name:** | **Ice Cream Social** | **Program Outcome and Recommendations:**  The ice cream social was highly attended and provided the students a friendly atmosphere to interact in. For the next social, also provide interactive games that will allow for greater interaction among the students. |
| **Program Location:** | **Perkins Plaza** |
| **Number of Attendees:** | **175** |
| **Total Funds Requested for Program:** | **$300** |
| **Total Funds Used for Program:** | **$275** |

Please list the materials, prices, and item location for the requested event amount below:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Item Name | Previous Unit Price | Quantity Requested | Amount Requested | Actual Unit Price | Quantity  Used | Amount Expended | Supplied By |
| Vanilla Ice Cream | $20.00 | 5 | $100.00 | $20.00 | 5 | $100.00 | Food Services |
| Chocolate Ice Cream | $30.00 | 5 | $150.00 | $25.00 | 5 | $125.00 | Food Services |
| Plastic Spoons | $0.50 | 100 | $50.00 | $0.50 | 100 | $50.00 | Walmart |
| Foam Bowls | $0.50 | 100 | $50.00 | $0.50 | 100 | $50.00 | Target |

|  |  |  |
| --- | --- | --- |
| **Program Name:** | **Sustainability Conference** | **Program Outcome and Recommendations:**  The event was a great learning experience for the students and enhanced their knowledge of green technologies. For the next conference, a larger mode of transportation could be used in order to allow for a greater number of attendees. |
| **Program Location:** | **University Park** |
| **Number of Attendees:** | **4** |
| **Total Funds Requested for Program:** | **$175.00** |
| **Total Funds Used for Program:** | **$175.00** |

Please list the materials, prices, and item location for the requested event amount below:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Item Name | Previous Unit Price | Quantity Requested | Amount Requested | Actual Unit Price | Quantity  Used | Amount Expended | Supplied By |
| Days Inn Hotel | $100.00 | 1 | $100.00 | $100.00 | 1 | $100.00 | Days Inn, UP |
| Gas Reimbursement | $0.55 | 136 miles | $75.00 | $0.55 | 136 miles | $75.00 | N/A |