

EVENT REPORTING SUMMARY

Waterford Central United Methodist Church

Name of Event: _____

Date of Event: _____

Name of Group sponsoring event: _____

Name(s) of key organizer(s) of event: _____

Number of people actively involved in creating/carrying out event: _____

Number of people who attended event: _____

Expenses: _____

Funds raised or other results (if applicable): _____

Funds will be used to _____

Please report on: Website Chimes Facebook PowerPoint e-Central Newsletter

(Please check all that apply)

(All publicity is at the discretion of the staff or marketing/communication team)

What was the goal of the event and how did it align with our mission: _____

Additional information you wish to have included in the reporting:

Please send your completed Event Report Summary to: Rich Pittenger- rpittenger@waterfordcumc.org

Office Use Only

<input type="checkbox"/> Date Received: _____	<input type="checkbox"/> Publication Type & Date:
<input type="checkbox"/> Email Facilitators, Date: _____	
<input type="checkbox"/> Other:	