



- Pastor
- Pastoral
- Finance
- Office

AFTER ACTION REPORT

Date of Event	Event Name

Parish Committee	Event Chairperson	Number of Helpers

Event Location	Approximate Event Attendance

Publicity for Event

<p>Event Description and Comments</p> <p>(Include event level of success or failure, whether event should be repeated in future, problems experienced, and how could event be improved next time.)</p>

Signature:	Date:
Printed Name:	Phone:

**Please complete the final accounting on back.
Please attach any supporting documentation that
might be helpful for this event next time.
Thank you!**

FINAL ACCOUNTING

INCOME (All dollars brought in from the event)	
Description of Item (include ticket sales, donations/contributions, other receipts)	Amount
TOTAL INCOME	

EXPENSES (All costs of putting on the event)	
Description of Item (include food, supplies, decorations, prizes, other, as well as place purchased, contact name & # – attaching copies of receipts is easy)	Amount
TOTAL EXPENSES	

NET PROFIT (LOSS)	
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