



# CIRCLE PROJECT COMPLETION FORM (PII)

Please Type or Neatly Print All Information

DATE SUBMITTED: \_\_\_\_\_

FORM SUBMITTED BY: \_\_\_\_\_

I. CIRCLE(S) PARTICIPATING \_\_\_\_\_

## II. EVENT CONTACT INFORMATION

Project Chair: \_\_\_\_\_

Email: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Additional Contact /Co-chair (if applicable): \_\_\_\_\_

Email: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Circle Leader: \_\_\_\_\_

Email: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Circle Treasurer: \_\_\_\_\_

Email: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

## III. EVENT DESCRIPTION:

1. Name/Title of Event: \_\_\_\_\_

2. Date of Event: \_\_\_\_\_

3. Location of Event (Business Name): \_\_\_\_\_

4. Attendance at Event (quantity) \_\_\_\_\_

## IV. EVALUATION:

1. Do you consider this project successful?  NO  YES

2. Why or Why Not: \_\_\_\_\_

3. Would you do it again? \_\_\_\_\_

**Please email event photos to [info@kingsdaughters.org](mailto:info@kingsdaughters.org) for inclusion in the Circular, The KD annual report, Facebook posts, Annual Recognition slide show, etc.**

**V. FINANCIAL REPORT**

**INCOME:**

- A. Tickets \$ \_\_\_\_\_
- B. Food/Beverage/Alcohol \$ \_\_\_\_\_
- C. Sales \$ \_\_\_\_\_ (specify what was sold \_\_\_\_\_)
- D. Auction (Live or Silent) \$ \_\_\_\_\_
- E. Chance Tickets \$ \_\_\_\_\_
  - a. # Tickets Sold \_\_\_\_\_
  - b. Price Per Ticket \_\_\_\_\_
- F. Sponsorships/Donations \$ \_\_\_\_\_
- G. Other Income \$ \_\_\_\_\_ (specify from what \_\_\_\_\_)
- H. TOTAL INCOME** \$ \_\_\_\_\_

**EXPENSES:**

- A. Rental \$ \_\_\_\_\_
- B. Food/Beverage \$ \_\_\_\_\_
- C. Entertainment \$ \_\_\_\_\_
- D. Promotion/Printing \$ \_\_\_\_\_
- E. Decorations \$ \_\_\_\_\_
- F. Permits / Licenses \$ \_\_\_\_\_
- G. Other \$ \_\_\_\_\_ (specify what \_\_\_\_\_)
- H. TOTAL EXPENSES** \$ \_\_\_\_\_

**Event Net Profit (Income less Expenses):** \$

**Total Amount Given to KD Office (to benefit CHKD):** \$

**Date Check Presented to KD office** \_\_\_\_\_  
*(Please submit check with Project II Completion Form to KD office.)*

**SPONSORS:**

List of Sponsors & Amounts donated (submit additional sheets if necessary)

Sponsor Name/Business	Cash or In-Kind	Donation Value

**THANK YOU FOR ALL YOUR EFFORTS AND HARD WORK!**

Please submit this completed form along with check for the total profit of your project to the KD office within 30 days of project completion. Presentation/Announcement of your project and donation is encouraged at the next KD Connect Meeting. Call the KD office if you have any questions or see the Circle Manual for further information on "Project Approval Process" and "Project Completion Process".

**Submit completed form to:**

The King's Daughters Office | 601 Children's Lane, 2<sup>nd</sup> floor | Norfolk, VA 23507 | Tel: 757.668.7098  
 Fax: 757.668.8907 | Email: [info@kingsdaughters.org](mailto:info@kingsdaughters.org)