



The Imperial Court of All Oklahoma, Inc.

Event Proposal

Proposed Location:

Proposed Date:

Event Details (Name / Description / Budget):

Charity Name(s):

How will the funds be divided? (Example: 100%, 75/25, etc.)

Participant(s):

Contact Information for Coordinator(s) **REQUIRED**:

Name (Print):

Name (Print):

Name (Print):

Name (Signature):

Name (Signature):

Name (Signature):

Phone:

Phone:

Phone:

Email:

Email:

Email:

IMPORTANT

Form **MUST** be submitted to the Board of Directors a minimum of 6 weeks prior to proposed event date. All funds raised **MUST** be the actual amount that will go to the charity after the deduction of any expenses. **ALL** expenses, with prior board approval, must be documented with **ORIGINAL RECEIPTS** attached to the "Event Receipt" form. Any and all additional expenses, **NOT APPROVED** by the board will be the cost of the Event Coordinator(s). Keep copies of all fundraising records in case any items are lost or otherwise not received.