



# LETR Event Report Form 2021

(Fax @ 803-772-0094 or email DJacobs@so-sc.org)

**Please complete and return to Special Olympics SC no later than 2 weeks after event.**

Agency:	
Name of Event:	
Date of Event:	/ / 2020
Person coordinating the event:	
Contact persons phone #	
Event Location/Address:	

**Please list all EXPENSES below. Use another page if necessary. Provide copies of all invoices.**

Expense (Attach receipts)	\$
<b>Total Expenses</b>	<b>\$</b>

**Please list all INCOME below.**

Misc. Donations	
Sponsorships	
<b>Total Income</b>	<b>\$</b>

**EVENT NET: (Total Income minus Total Expenses)**

**\$ \_\_\_\_\_**

**IF THIS EVENT INVOLVES MORE THAN ONE AGENCY, LIST AGENC & % TO CREDIT EACH**

**AGENCY %**

**AGENCY %**
