

**Florida Agricultural and Mechanical University
Office of Continuing Education**

(Enter Program Name)

(Enter Program Period)

Revenue

Registration Fees	Attendees	Fee		Estimated Revenue	Actual Revenue
Early Registration					
General Registration					
Late Registration					
Faculty/Staff Registration					
Student Registration					
Exhibitor Fees					
Sponsorships					
Total Revenue				\$0.00	\$0.00

Expenses

Speakers & Staff

	Hourly Rate	No. of Hours	FICA	Estimated Total	Actual Total
Faculty Overload					
OPS Staff					
Honorarium					
Other					
Total Speakers & Staff				\$0.00	\$0.00

Meeting Venue

	Hourly Rate	No. of Hours	Rate	Estimated Total	Actual Total
Facility Rental					
Internet Fees					
Equipment Rental					
Other					
Total Venue				\$0.00	\$0.00

Food

	Cost	No. of Participants	No. of Days	Estimated Total	Actual Total
Breakfast					
Lunch					
Dinner					
Breaks					
Miscellaneous					
Total Food				\$0.00	\$0.00

Supplies/Materials

	Unit Cost	Quantity		Estimated Total	Actual Total
Nametags					
Programs/Publications					
Conference Bags/Paraphernalia					
Miscellaneous					
Total Supplies				\$0.00	\$0.00

Marketing

	Unit Cost	Quantity		Estimated Total	Actual Total
Printing					
Postage/Freight					
Media Advertising					
Miscellaneous					
Total Marketing				\$0.00	\$0.00

Travel

	Unit Cost	Quantity	No. of Nights	Estimated Total	Actual Total
Air Fare					
Hotel					
Per Diem					
Miscellaneous					
Total Travel				\$0.00	\$0.00

SUB-TOTAL EXPENSES				\$0.00	\$0.00
Controller's Fee (6% of expenses)				\$0.00	\$0.00
CE Admin Fee (15% of revenue)				\$0.00	\$0.00
TOTAL EXPENSES				\$0.00	\$0.00
NET INCOME				\$0.00	\$0.00

Dean/Director: _____

Date: _____

Program Coordinator: _____

Date: _____

Continuing Education

Budget Coordinator: _____

Date: _____

Director: _____

Date: _____