

**College Events
Request for Class Code**

Class Code Assigned: (Budget Office) _____

Sponsoring Department: _____

Department Number: _____

Name of Event: _____

Individual with Budget Responsibility: _____

Event Beginning Date: _____

Event Ending Date: _____

Description of Event: _____

Event Budget (Estimate)

Revenue

External: \$ _____

Internal (List Contributing Departments):

_____ \$ _____

Total Revenue \$ _____

Expenses

_____ \$ _____

Total Expenses \$ _____

Authorized Signature: _____