
[Today's Date]

All Saints Episcopal Church-Detroit
Outreach Program proposal for

[Project Name]

VESTRY:

6 mth PRELIMINARY PROPOSAL [date_____]

CONDITIONAL VESTRY APPROVAL *(additional information requested)*

[DATE: _____]

3 mth FINAL completed proposal [date_____]

FULL VESTRY APPROVAL [DATE_____]

I. Goals/Objective

WHAT TYPE OF OUTREACH PROGRAM IS THIS?

- o (Use this the space to summarize the program)

II. Summarize the outreach program

Is this program going to be?

- A **one-time** event
- The **same event multiple times** within the same calendar year
- An **annual** event
- A Designated non-All Saints program (i.e. Crossroads, Meals on Wheels, Forgotten Harvest, etc.)

When do you plan on having this event?

a) Date:

Will this event be held on-site or off-site?

- On-site
- Off-site, where: _____

Has this type of program/event been conducted before?

- Yes
- No

- If yes, when: _____
 - o Attach the recap report that was given to the Vestry.
 - o **If there was no recap submitted earlier, a recap will need to accompany this proposal.**

III. Anticipated revenue?

Will any money be raised from this outreach program?

- Yes No
 - Amount of anticipated revenue?
 - How will these funds be shared within the church?

Other items:

- Yes No

List the other items: _____

At least 50% MUST go to the **General Fund UNLESS** it is a *non-revenue outreach program

- Designated non-All Saints program
- Breakdown of the other 50% from revenue

→ _____% will go to:

→ _____% will go to:

→ _____% will go to:

→ Other amount _____% will go to:

IV. Budget

State the proposed costs and budget of the project.

Also include information on how you intend to manage the budget.

Items needed	Quantities	Anticipated Costs
TICKETS		
FLYERS		
FOOD		
FLYERS for FACEBOOK & WEBSITE		
DEPOSIT		
POSTAGE		
MISC.		
	Total	\$

V. Endorsements/Sponsors (optional)

Provide the names and addresses of individuals and/or companies who might support and/or endorse the project.

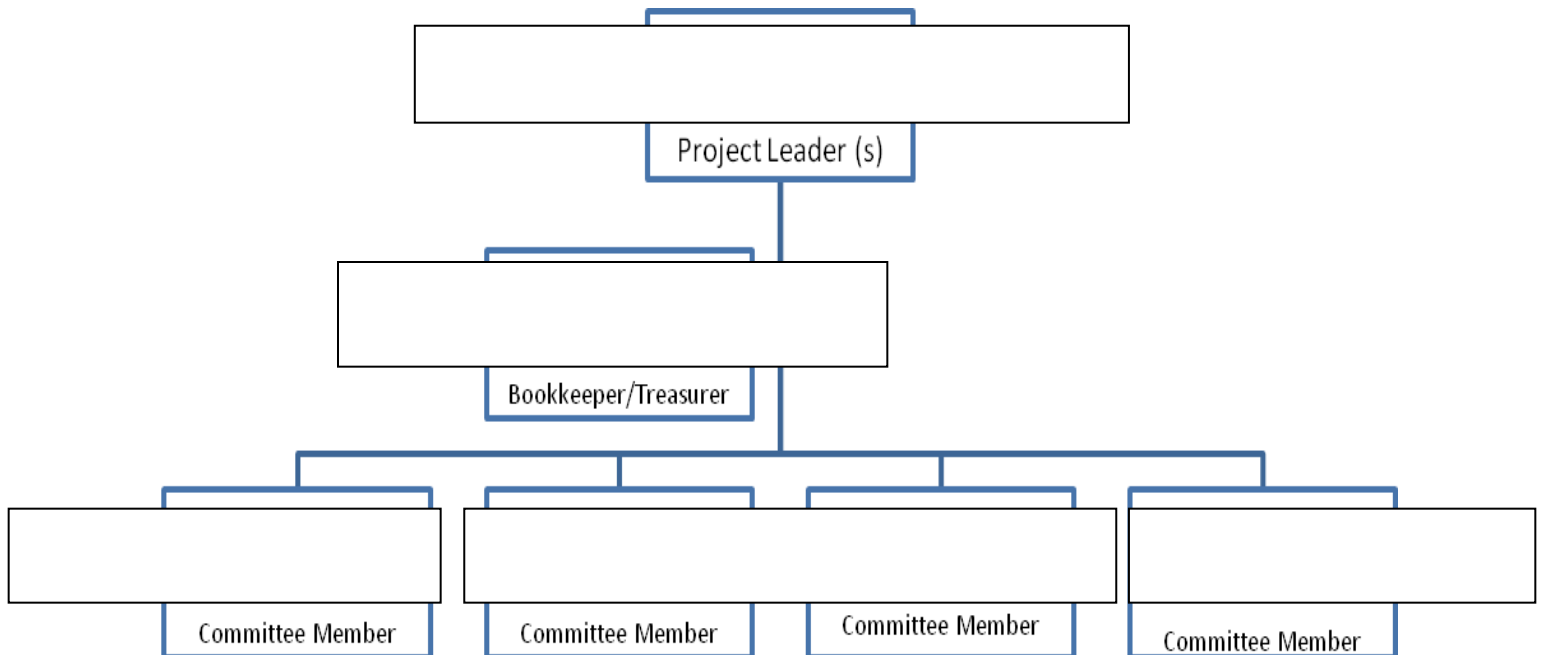
- Sponsor #1:
Address:
- Sponsor #2:
Address:

VI. Evaluation

If you have raised any revenue,
you have **ONE MONTH FROM THE COMPLETION DATE** to
submit a **RECAP REPORT** to the **Finance Committee**.

VII. Key Personnel

List the names of **all key** committee members who will be responsible for completion of this outreach program, as well as the other people involved in the project.



- Don't forget to include:
 - Telephone number and e-mail addresses