

**CSSA BUDGET SHEET**  
Estimated cost & revenues



**Event:** ..... **Date:** .....  
**Convenor:** ..... **School:** .....  
**Phone: (W)** ..... **(M)** .....

<u>Description of Cost</u>	<u>Service Provider: Name &amp; Address</u>	<u>Estimated Cost</u> inc GST
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**Venue fees:** .....  
(Please itemise) .....

**Officials:** .....  
.....

**Awards:**  
Certificates .....  
Medals .....

**Refreshments:** .....  
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**First Aid:** .....

**Equipment Hire** .....  
.....

**Gifts:** .....

**Coordinator Costs** .....  
Postage .....  
Photocopying .....  
Relief Day .....  
Other .....  
(please specify) .....

**ESTIMATED COST** \$ .....

**+ 10% Contingency Costs** \$ .....

**TOTAL ESTIMATED COST** \$ ..... **(A)**

**ESTIMATED NUMBER OF COMPETITORS** ..... **(B)**

**ESTIMATED COST PER COMPETITOR =A/B (Rounded upwards)** \$ .....

Please send the completed CSSA BUDGET SHEET at least 4 weeks prior to the event to the CSSA Executive Officer Linda Heslehurst E: [linda@cssa.nsw.edu.au](mailto:linda@cssa.nsw.edu.au) M: 0418 685 898