

SCCFBC EVENT CHECKLIST

Event Name	
Event Date/Time	
Primary Event Coordinator	
Event Logistics Coordinator	
Event Team	
Location (s)	
Funding Department	
Target Audience	
Anticipated Attendees	

FACILITIES & ARRANGEMENTS

INVITATIONS	Person Assigned	Phone Number	Date Received	Date Completed
List of Invitees (w/salutations)				
Design of Invitations/Letters				
Printing of Invitations/Letters				
Labeling & Postage				
Enclosures: maps, RSVP, etc.				
Follow-up Calls/Confirmations				
RSVP Coordination				
Invitation of Special Guests				
E-mail Invitation Copy				
Other:				
FOOD SERVICES	Person Assigned	Phone Number	Date Received	Date Completed
Menu				ALCOHOLD STREET
Caterer				
Space Setups				
Linens				
Centerpieces				
Other:				
TECHNICAL	Person Assigned	Phone Number	Date Received	Date Completed
Audio Needs				
Visual Needs				
Video Recording of Event				
Recording of Program				
Other:				
Other:				