

SCHEDULING SHEET FOR LT. GOVERNOR

DATE OF REQUEST: ____ / ____ / ____
BY WHOM: _____

DATE OF EVENT: ____ / ____ / ____ DAY OF EVENT: _____

TIME: _____ DRESS: _____

NAME OF ENTITY / ORGANIZATION: _____

NAME OF EVENT: _____

LOCATION / ADDRESS OF EVENT: _____

TRANSPORTATION? _____

PARTICIPATION: Speaking? _____ How long? _____ Attending? _____

Topic(s) or Details re Participation: _____

Need talking points? _____ Speech? _____

CONTACT PERSON: _____ Phone Number(s): _____

SITE CONTACT PERSON: _____ Cell (*day of event*): _____

Cost of meal: \$ _____ Details: _____

Description and cost of plaque or other object presented: _____

Other cost(s): _____

Podium on site? _____ Schedule of events? _____

Needed at event (*circle any and all that apply*):

- Podium - Display Table - LGOA Staff - Info. Bags - Books - Handouts - Photo - Video

Time of Table Set-up: _____ Time of Table Breakdown: _____

Number of Participants (anticipated): _____

ATTACH E-MAIL OR OTHER CORRESPONDENCE RECEIVED PERTAINING TO EVENT