

FOOD AND CAKE REVUE PROJECT RECORD

20 _____

Number of Years in Food & Cake Revue Project: _____

What are your goals for this project?

A. _____

B. _____

Culinary Description:

Type of Materials/Supplies or Equipment Used (note item and cost if applicable):

Item: _____

Cost: _____

Item: _____

Cost: _____

Item: _____

Cost: _____

Item: _____

Cost: _____

Item: _____

Cost: _____

Total Cost to you (if any): _____

PROJECT MEETINGS

Number of project meetings held: _____ Number I attended: _____ County meetings I attended: _____

Number of hours spent on exhibits: _____

