Philanthropy Form

Organization: ________________________________________________ Date(s): ______________________________

Location of Event: ______________________ Co-sponsor (if applicable): ______________________

Benefiting Organization(s): __________________________________________

Contact Person: ______________________________________________________________________________________________

Title/Short Description of Event: ________________________________________________________________

_________________________________________________________________________________________________________________

Money Raised: Total Amount of Money Raised: $____________

Total Amount of Expenses: $____________

Total Amount of Money Donated: $____________

Other Goods/Services Donated (ex: Canned Goods, Clothing, etc.): ________________________________

_________________________________________________________________________________________________________________

Time (approximated for planning and implementation of event): ________________________________

Verification: Attach verification of hours and money donated.
Example: Letter from organization thanking you for time and/or money.
Copy of returned check.

____________________________________
Printed name of organization representative

____________________________________
Signature of organization representative Date