



## FUNDRAISING EVENT FOLLOW-UP REPORT

**PLEASE SEND THIS COMPLETED FORM WITH THE PROCEEDS OF YOUR EVENT TO:**  
GIFT OF LIFE FAMILY HOUSE ATTN: GENEVIEVE GRABOWY | 401 CALLOWHILL STREET | PHILA, PA 19123

### Fundraising Event Information

Event Name:

Event Date:

Net Income:

ADDITIONAL INFORMATION  
ABOUT YOUR EVENT:

### Contact Information

Organization/ Group Name:

Contact Person:

Address (contact person):

City, State, Zip:

Cell Phone:

Home Phone:

E-Mail Address:

### Donations (cash or in-kind items)

**Please list any businesses that provided cash or in-kind sponsorship items so we may properly thank them. Use the back of this form if necessary. In-kind sponsorship is defined as a donation of a product or service, such as printing or silent auction items.**

Business Name	Contact	Address	Item(s) or \$ Donated

Thank you for coordinating an event to support Gift of Life Family House!