

Donation Tracking Form

| Event Organizer Name: | |
|---|---------------------------------------|
| Email : | Phone: |
| Address: | · · · · · · · · · · · · · · · · · · · |
| Event Name: | _ Total Amount Raised: |
| Funds designated to (greatest need, unless otherv | vise specified): |

Donor Information:

| Name | Address | City and Postal Code | Phone Number | Email* | Donation Amount |
|------|---------|----------------------|--------------|--------|--------------------|
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^{*} By providing your email address, you are providing consent to be contacted by House of Friendship via email.