

2022 Holland-Zeeland Area CROP Hunger Walk FINAL REPORT FORM

Organization Name: _____

Recruiter's Name: _____

Recruiter's Phone: _____

Email: _____

1. ENVELOPE RECORD

Number of Envelopes Received From Chairperson _____

Number of **UNUSED ENVELOPES** returned _____

Please return all unused materials to area lead person

2. RECORD OF DEPOSITS

Date of Deposit _____ Amount of Deposit \$ _____

Date of Deposit _____ Amount of Deposit \$ _____

Date of Deposit _____ Amount of Deposit \$ _____

Date of Deposit _____ Amount of Deposit \$ _____

3. WALKER INFORMATION

Total Number of Walkers (Saturday & Sunday) (best estimate) _____

4. \$250 CONTRIBUTORS (Individual donors whose total gifts are \$250 or more - needed for IRS)

Name & Address _____

_____ Amount _____

Name & Address _____

_____ Amount _____

Name & Address _____

_____ Amount _____

Name & Address _____

_____ Amount _____

\$1000 WALKERS (Persons raising at least \$1000—a special thank you will be sent)

Name & Address _____
_____ Amount _____

Name & Address _____
_____ Amount _____

Name & Address _____
_____ Amount _____

Name & Address _____
_____ Amount _____

Name & Address _____
_____ Amount _____

Name & Address _____
_____ Amount _____

Name & Address _____
_____ Amount _____

YOUTH GROUP REPORT

Group / Advisor Name _____

Advisor Address _____

Amount Raised _____

Group / Advisor Name _____

Advisor Address _____

Amount Raised _____

***Please list any additional \$250 donors & \$1000 walkers
on a separate sheet.***