

2025 Holland-Zeeland Area CROP Hunger Walk FINAL REPORT FORM

Organization Name: _____

Recruiter's Name: _____

Recruiter's Phone: _____

Email: _____

Please return unused materials with your Captain's Packet and Donation Envelopes

WALKER INFORMATION

Total Number of Walkers (best estimate) _____

\$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 \$ _____

YOUTH GROUP REPORT

Group / Advisor Name _____

Advisor's contact info _____

Amount Raised \$ _____

Please list any additional \$250 donors & \$1000 walkers below.