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True 100% Fundraiser™

Fundraising Follow Up Form:

Start Date: ____/_____/20____
End Date: ____/_____/20____

ORGANIZATION NAME: _____ ADMINISTRATOR: _____

REASON/CAUSE FOR FUNDRAISING EVENT: _____

SPONSOR (MYJOECARD.COM BUSINESS MEMBER): _____

Follow Up Questions:

1. What went well in your event?

2. What did not go so well / what would you change about the event?

3. Would recommend this event be done again? (Circle) 1 (Not Again) 2 3 4 5 (Definitely)

4. Are there any resources that the next administrator of this fundraiser (if done again), should know? *Please include websites, contacts, paperwork, etc.*

5. We want to offer the absolute best fundraising solution for your school/group and others in the future. How can we improve this fundraiser and make it better?

Financial Information:

Total Event Income: $_____ Total Event Expenses: $_____

Profit Goal: $_____

Approved Expenses Incurred: $_____ Actual Expenses Incurred: $_____

Difference: $ _____

Total Event Profit *(Event Income – Actual Expenses Incurred)* = **$_____**

I, _____ verify, to the best of my knowledge, that all the above information is true and correct.
(Administrator's Signature)

Please print 2 copies, and send one to the Sponsor (if Applicable) and one to MyJoeCard.Com.

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