



# Event Summary Form

Please include this completed form inside a large envelope along with all cash and check donations.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Group/Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Event Title: \_\_\_\_\_ Event Date: \_\_\_\_\_

Event Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total Money Collected: \$ \_\_\_\_\_

**Volunteer Hours** (optional): Please record any volunteer hours, including time spent planning, shopping, putting kits together, or collecting items.

\_\_\_\_\_ # volunteers X \_\_\_\_\_ # hours each = \_\_\_\_\_ total volunteer hours

## Submitting Donations:

- Donations may be mailed or brought to the Nursery, which is located at:  
4544 4th Avenue South, Minneapolis, MN 55419.
- Donations are accepted Monday-Friday 8 a.m. – 5 p.m. and Saturday/Sunday 9 a.m. – 4 p.m.

## We ask that you please:

- Submit all monetary donations in one large envelope, no later than 30 days after the event.
- Include **Monetary Donation Forms** for anyone requesting a receipt for cash or check.
- Include **In Kind Donation Forms** for anyone requesting a receipt for an item donation.

We'd love to hear about your event!

Send photos, stories, or feedback to [AGilleland@CrisisNursery.org](mailto:AGilleland@CrisisNursery.org)