

Greek Life Philanthropy Reporting Form

Chapter: _____

Today's Date: _____

Chapter Contact Person: _____

Contact Phone: _____

PLEASE NOTE: ALL FORMS MUST BE TURNED IN WITHIN 20 BUSINESS DAYS OF THE EVENT.

BEFORE YOU BEGIN: Do not submit this form if the verification of donation is not attached. For philanthropic donations, you must submit a copy of the check you sent to the philanthropic organization/agency, or a letter that you received from that organization verifying your donation. For non-monetary donations, please attach a receipt detailing the donation.

Name of Event: _____

Date of Event: _____

Date of Donation: _____

Agency Receiving Donation(s): _____

Agency Contact Name: _____

Agency Phone: _____

Monetary Donations (If the event is co-sponsored or paired with another Greek organization, each chapter must submit a separate form.)

Total Amount of Money Raised: (For paired event, include all money raised) \$ _____

Total Amount of Money YOUR chapter donated to the agency: \$ _____

Non-monetary Donations (i.e. canned food, clothing, hygiene products)

Type of Items/Goods Donated: _____

Number of Pounds of Items/Good Donated: _____

**Use the back of this sheet to show the exact amount and types of items.

Do not submit this form if the verification of donation is not attached.

For questions or concerns, please contact:
Nicki Rowlett, Assistant Director of Inclusion and Student Engagement/Greek Advisor
at 217.424.6355 or nrowlett@millikin.edu

