



Charitable Donation Follow-Up Report

(Please complete both pages of the application)

Date: _____

ORGANIZATION INFORMATION **REQUIRED**

Organization Name _____

EIN (Federal Tax ID) _____ Organization Fiscal Year End (date) _____

Mailing Address _____ City _____ State _____

Primary Contact Name _____ Primary Contact Title _____

Primary Contact Email Address _____ Phone _____ Fax _____

Secondary Contact Name _____ Secondary Contact Title _____

Secondary Contact Email Address _____ Phone _____ Fax _____

GRANT FUNDING INFORMATION **REQUIRED**

Date Funding was received _____

Amount received _____

Type of Funding Received:

- General Support
- Capital Campaign
- Endowment
- Specific Project Support
- Special Event
- Other: _____

Describe the use of the funds (including number served):

What results were achieved as a result of the funding?

How were results measured?

Briefly discuss your evaluation of the results?

Follow-Up Application Submission Instructions:

Send application via Mail to: Ingram Charities
4400 Harding Road, 9th Floor
Nashville, TN 37205-2290

Send application via Email (preferred) to: Apply@IngramCharities.com

Please email (preferred) or call 615-298-8200 if you have any questions.