Outreach Council Gift Report

**Name of Organization:**

**Address:**

**Contact Person:**

**Phone Number:**

**Email Address:**

**Title of Project:**

**Amount Gifted:**

*Please complete this form, using as much space as necessary, and return it to the address below.*

1. How has the Project added to the vitality of our organization and how did the results compare to those anticipated in the original request?
2. Approximately how many people benefited from the Project?
3. What, if anything, might you do differently going forward?
4. Anything else you’d like to add?

RETURN COMPLETED FORM and ANY ADDITIONAL INFORMATION TO:

info@stpaulsec.org (subject: Outreach Request)

*and/or*

St. Paul’s Church, ATTN: Outreach Council, 25 Westminster Rd., Rochester, NY 14607