

Penn Treaty Special Services District
SPONSORSHIP REPORT FORM

Please provide the information requested below.
This form is due six months after the completion of the sponsored event/activity.

SPONSORSHIP AMOUNT: \$ _____

SPONSORSHIP AWARD DATE: _____

ORGANIZATION:

Date Report Submitted: _____

- Name of Event: _____ Is this an annual event? [] Yes [] No
- Date of Event: _____ Is this a fundraiser? [] Yes [] No
- If this is a fundraiser how much did you raise this year after expenses?
- If this is a annual fundraiser how much money did you raise last year after expenses?

1) As of the date of this submission, are there unused funds from this sponsorship in your account?

[] Yes. There is \$ _____ in unused funds. [] No

2) Please provide copies of receipts for costs associated with this Sponsorship.

3) Were the goals and objectives of the event/activity reached? ___ No ___ Yes

4) Briefly describe the benefits to the community the event/activity achieved.

5) Approximate number of residents/families served by this Sponsorship:

6) If you were to undertake this project again, what – if anything – would you do differently?

NAME _____

President / CEO / Executive Director

SIGNATURE _____ **DATE** _____

***Please print, sign, and submit this Report by email to: ptssd.secretary@gmail.com
or send by post to: PTSSD, 702 N. 3rd Street, PMB #38, Philadelphia, PA 19123.**