Event PIN #: _____
Event Name: _____
Event Date: _____
Co./Community Code: _____
Event Type: _____Region: _____

CROP Hunger Walk Treasurer's Report

Report compiled by: Name: _____

Address, City, State ZIP:_____

Phone #: _____ E-mail address: _____

Congregation/ Organization	Mailing Address/City/State/ZIP	Congregation's Denomination	Total # of Walkers from Congregation or Organization	Total $ Amount Raised

TOTAL Amount of Money Raised: $_____

Please also note on the back of this form, or as part of your report, a list of sponsors who contributed $250 or more (name, address, and amount); any Corporate Matching Gifts (agency, address and amount), and any in-kind donations such as canned goods, prizes, etc. Thanks! – Questions? Please contact your CWS/CROP Regional Office at 1-888-297-2767.

Please return a copy of your completed Treasurer's Report to your CWS/CROP regional office, with the USED AND UNUSED CROP Hunger Walk Donation Envelopes. Thank you!

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