

# CONFIDENTIAL

## INFORMATION FORM

FAX 888-853-1110 or EMAIL to [jhewett@hewettconsulting.com](mailto:jhewett@hewettconsulting.com)

Organization Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Website: \_\_\_\_\_

Executive Director \_\_\_\_\_ E-Mail \_\_\_\_\_

Other Key Staff: \_\_\_\_\_ E-Mail \_\_\_\_\_

\_\_\_\_\_ E-Mail \_\_\_\_\_

Mission Statement \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>Funding Committee Chair:</b> Name: _____ E-Mail: _____ Phone: _____	<b>Person Completing This Form:</b> Name: _____ E-Mail: _____ Phone: _____
---------------------------------------------------------------------------------	-------------------------------------------------------------------------------------

Primary Service Area Zip Code(s): \_\_\_\_\_

Fiscal Year \_\_\_\_\_ Last Audited Financial Statement \_\_\_\_\_

**YOUR PROJECT:**

What is the project you're considering?

- |                                          |                                     |
|------------------------------------------|-------------------------------------|
| <input type="checkbox"/> Expansion       | <input type="checkbox"/> Relocation |
| <input type="checkbox"/> Debt Retirement | <input type="checkbox"/> Renovation |
| <input type="checkbox"/> Parking         | <input type="checkbox"/> Other      |

Brief Description of Project: \_\_\_\_\_

Estimated Cost of Project: \_\_\_\_\_

Expected Timing of Capital Campaign: \_\_\_\_\_

### Individual Donor Data

2007	2008	2009
New	New	New
Renewed	Renewed	Renewed
LYBUNTS	LYBUNTS	LYBUNTS
SYBUNTS	SYBUNTS	SYBUNTS

### Corporate Donor Data

2007	2008	2009
New	New	New
Renewed	Renewed	Renewed
LYBUNTS	LYBUNTS	LYBUNTS
SYBUNTS	SYBUNTS	SYBUNTS

### Foundation Gifts Data

2007	2008	2009
New	New	New
Renewed	Renewed	Renewed
LYBUNTS	LYBUNTS	LYBUNTS
SYBUNTS	SYBUNTS	SYBUNTS

### Income / Expense Data

2007	2008	2009
Operating Income	Operating Income	Operating Income
Operating Expenses	Operating Expenses	Operating Expenses
Surplus	Surplus	Surplus
(Deficit)	(Deficit)	(Deficit)

Total Endowment: \$ \_\_\_\_\_ Restricted \$ \_\_\_\_\_ Unrestricted \$ \_\_\_\_\_

**Sources of 2009 Operating Income**

Pledged Contributions	\$_____	( %)
Unpledged Contributions	\$_____	( %)
Earned Income	\$_____	( %)
Draw on Endowment	\$_____	( %)
Other	\$_____	( %)
TOTAL 2009 BUDGET INCOME	\$_____	(100%)
TOTAL 2009 BUDGET EXPENSES	\$_____	
Overage	\$_____	
(Deficit)	(\$_____)	

**2009 Gift Levels (Please indicate number of gifts from all sources at each level):**

(\$1-\$499)	_____	(\$5,000-\$7,499)	_____
(\$500-\$999)	_____	(\$7,500-\$9,999)	_____
(\$1,000-\$1,999)	_____	(\$10,000-\$14,999)	_____
(\$2,000-\$2,999)	_____	(\$15,000-\$19,999)	_____
(\$3,000-\$3,999)	_____	(\$20,000-\$24,999)	_____
(\$4,000-\$4,999)	_____	(\$25,000+)	_____
		No Recorded Gift	_____

**2009 Operating Income by Month:**

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC

**DEBT:**

Amount of Current Debt: \_\_\_\_\_ Interest Rate(s): \_\_\_\_\_  
 Monthly Debt Payment: \_\_\_\_\_ Cause of Debt: \_\_\_\_\_  
 When will debt be retired? \_\_\_\_\_

Please list your two most recent capital campaigns:

Year \_\_\_\_\_

Year\_\_\_\_\_

Project: \_\_\_\_\_  
 # of pledges: \_\_\_\_\_  
 Total pledged: \$\_\_\_\_\_

Project: \_\_\_\_\_  
 # of pledges: \_\_\_\_\_  
 Total pledged: \$\_\_\_\_\_

Total received: \$\_\_\_\_\_

Total received: \$\_\_\_\_\_

Outside Consultant Used? \_\_\_\_\_

Outside Consultant Used? \_\_\_\_\_

Does your organization promote planned giving? \_\_\_\_\_If yes, describe the program:\_\_\_\_\_

What is your procedure for receiving gifts of stock or other negotiable securities? \_\_\_\_\_

What financial appeals are typically made in addition to the annual fund? \_\_\_\_\_

In 2009, what was the total given to these special appeals? \_\_\_\_\_

Please list all designated gifts of \$5,000 or more for additional projects or causes not listed above over the past three years:

2007	2008	2009