FMDTF / Tracking / In-kind Donation Form (updated 12.30.15)

Contact Date				contact	
POSITION ATTENDANCE		LOCATION		METHOD OF CONTACT	
DFC Project Coordinator		Bessie Rowell CC	Activit	Activity organized by FMDTF	
DFC Project Director		Franklin Hospital			(activity)
Melissa Lee		Franklin City Hall	Activit	y organized by other _	
FYI Coordinator		Franklin High School			(activity)
Leadership Members (Add names)		Franklin Middle School	Please pro	vide details using othe	er side if needed
		Other, specify	and/or staple attachment regarding the activity.		ng the activity.
			_		
			_		
Name/Initials		_		PARTICIPATION FROM EACH TOWN	
(person filling out the form)			_ Franklin		
CLIENT DESCRIPTION		1.00	Hill		
If large enrollment, esti	mate to best of you	ir ability.	Other		
<u>Age</u> 0 - 5	18 - 20	Candar			
0 - 3 5 - 11	16 - 20	<u>Gender</u>			
5 - 11	21 - 25 26 - 44	male		INFORMATION DIS	SEMINATION
15 - 17	45 - 64	IIIale		IN OKMATION DIS	<u>SCIMINATION</u>
13-17	45 - 64 65+	female			
Race	05+	lemale			
White Non-Hispanic		Hispanic or Latino			
Asian/Asian American		African American		TOTAL NUMBER IN	ATTENDENCE
Native Hawaiian/Pacific Islander		Multi-racial/multi-ethnic	:		
Native Am/Alaska	a Native	specify:			
		Volunteers and Donati	ions		

Date	Name	Total Hours	Donation Amount	Items/Services Donated	Thank You Note