

Form 990

WorkSheet

Organization Name: _____ EIN: _____

Contributions, Gifts and Grants

Name	
Address of the Contributor	
Type of Contribution	
How the Contribution was made	
Is this an unusual grant?	
Total Contribution	

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Organization Name : _____ EIN: _____

Type of Compensation:	
Total Expenses:	Program service expenses:
Management and general expenses:	Fundraising expenses:
Description:	

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