



Team OMF

Independent Fundraising Guide *Post-Event Evaluation*

Name of Event: _____ Date: _____

Chairperson Name: _____ Phone: _____

Home Address: _____

E-mail: _____

Funds Raised (Was the ticket price/admission fee correct, were there enough sponsors or gifts-in-kind, did you reach your fundraising goal?):

Purchases Made for Event (What was purchased and how much?):

Comments on Purchases (Too much purchased, too little, etc.):

Timeline Adjustments to the Schedule (What was the actual timeframe that worked for you?):

What worked well?

Changes/Suggestions:

Can this event become an annual event?

Please invite your committee to share their evaluation at your event wrap-up meeting.