

## Donor Worksheet

✓	Category	Donors	Name	Contact Method	Date	Outcome
Use the letter "a" in the checkbox to create a checkmark "✓".						
	Home Life	Me!				
	Home Life	Spouse or Significant Other				
	Home Life	Parents				
	Home Life	Grandparents				
	Home Life	Grandparents				
	Home Life	Child				
	Home Life	Child				
	Home Life	Sibling				
	Home Life	Sibling				
	Home Life	Aunt / Uncle				
	Home Life	Aunt /Uncle				
	Home Life	Cousins				
	Home Life	Cousins				
	Home Life	In-laws				
	Home Life	Other Relative				
	Home Life	Other Relative				
	Home Life	Neighbor #1				
	Home Life	Neighbor #2				
	Home Life	Neighbor #3				
	Home Life	Neighbor you've never met				
	Home Life	Landlord				
	Home Life	Landscaper				
	Home Life	Realtor				
	Home Life	Mail Carrier				
	Home Life	Homeowner Assoc. Members				
	Home Life	Former College Professor				
	Home Life	Former College Roommate				
	Home Life	Parents' Friend				
	Home Life	Sibling's Friend				
	Home Life	Significant Other's Friend				
	Home Life	Friend				
	Home Life	Friend				
	Home Life	Friend				
	Out and About	Physician				
	Out and About	Dentist				
	Out and About	OB-Gyn				
	Out and About	Chiropractor				
	Out and About	Pediatrician				
	Out and About	Veterinarian				
	Out and About	Optometrist				
	Out and About	Physical Therapist				
	Out and About	Massage Therapist				

Donor Worksheet

[illegible]