



REACH OUT AND READ WISCONSIN

COMMUNITY FUNDRAISING CHECKLIST

Annual Book Budget: _____

1. **Local hospital** _____
Foundation? Yes _____ No _____
Community outreach funds? Yes _____ No _____
Contact name: _____
Address: _____
Contact info: _____

Local hospital _____
Foundation? Yes _____ No _____
Community outreach funds? Yes _____ No _____
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Address: _____
Contact info: _____

2. **Local United Way:** _____
Contact name: _____
Contact info: _____

3. **Local civic organizations: Rotary/Service Club/Lions Club/ Junior League:**

Contact name: _____
Contact info: _____

4. **Local library:** _____
Children's librarian: _____
Phone: _____

5. **Local retail businesses contributing to community:**
Wal-Mart: _____
Community relations manager: _____
Phone: _____

Target: _____
Community relations manager: _____
Phone: _____

Barnes & Noble: _____
Community relations manager: _____
Phone: _____
Grocery Store: _____

Manager: _____

Phone: _____

Pharmacy (s): _____

Contact name: _____

Durable medical equipment providers (s): _____

Contact name: _____

Phone: _____

Independent book stores: _____

Contact: _____

Phone: _____

Other: _____

Contact name: _____

Phone: _____

Other: _____

Contact name: _____

Phone: _____

6. **Local Foundations:** _____

Contact: _____

Granting Cycle: _____

7. **Local philanthropic individual:** _____

Contact information: _____