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Date Submitted: 1/1/2019

Prospect Manager: Insert name...

Event Name: Event name...

Dedicated event for a seven figure prospect? Select One

Event Date: 1/1/2019

ETC: Select One

Event Time: 00:00 am or pm

Event Type: Type...

Event Location: Location name...

Location address...

Hospital Service Line Insert Hospital Service Line

Est'd Attendance: 1,234

Blocked Dates: 5/13 - 5/24, 5/27 - 6/7, 11/4 - 11/22

Event Description:

Please provide a brief description of the event...

Please indicate all that are required for this event

- | | | | |
|----------------|--------------------------|-------------------|--------------------------|
| Reception: | <input type="checkbox"/> | Name Tags: | <input type="checkbox"/> |
| Seated Dinner: | <input type="checkbox"/> | Valet: | <input type="checkbox"/> |
| Audio/Visual: | <input type="checkbox"/> | Security: | <input type="checkbox"/> |
| Photographer: | <input type="checkbox"/> | Giveaway: | <input type="checkbox"/> |
| Videographer: | <input type="checkbox"/> | Florals Required: | <input type="checkbox"/> |
| Signage: | <input type="checkbox"/> | Volunteers: | <input type="checkbox"/> |

Event Objective:

Event objective...

Event Goal - What is the definition of success?

Event goal...

VIP/Headline Attendee/s:	Who would help you make this event a success? Who would be someone that could move a donor in a positive direction?					
	Executive Leadership *	Donor	Physicians	Volunteer Leadership	Government Officials	Foundation Leadership
1st Choice						
2nd Choice						
3rd Choice						
4th Choice						

* Executive Leadership should only be asked to attend an event after the form is reviewed by PM and team and approved by the Major Gift AVP.

Invitation:

We are defaulting to the template design. A PDF will be provided for you to review by your Event Team Coordinator. If you require a specialized invitation please provide the reason. The exception will need an approval by Paige and the AVP of Major Gifts.

Please indicate all that are required for this event:

Save the Date		Invitation	
Hard Copy:	Select one	Hard Copy:	Select one
Hand Addressing:	Select one	Hand Addressing:	Select one
Electronic:	Select one	Electronic:	Select one

Stewardship:

Please indicate all that are required for this event:

Recognition Item: **Select One**

Specialty Item: If speciality item is needed, please enter what the item is here (ex: lab coat, plaque, etc.)

Communications:

Please indicate all that are required for this event:

Media Exposure:
 Talking Points:
 Moderator:
 Social Media:

Issues/Concerns:

Insert issues/concerns...

Follow Up Plan:

Insert your follow up plan...

For Event Team Only.

Fund/Cost Center: 700 - 123
Raisers Edge: Yes
Expected Gross: \$ 0.00
Estimated Expense: \$ 0.00

Unique Exposure: Yes
Insurance Required: Yes

Post Approval Questions:

Post Approval Questions...

Gift Officer/ Event Team Coordinator / Other Staff Member

Please send the edited mailing list to Amalia list to include the Constituent ID, Import ID, Date invitation was mailed and Event name in RE. We can either add a Constituent Appeal to each record in RE (for larger mailing lists) or we can import the invited Constituents to the Event record

Deadline for this request =

1/1/2019

Due to the large number of data requests. Please allow two weeks for delivery of data.

Target Quantity

0

Please include an estimate of the total number of donors you believe the select will produce.

Mailing/Email list/Invite list

Is this request for a fundraising event, cultivation event or a data report? Combination?

Insert text...

Will these names receive an invite? Will these names be mailed/emailed a solicitation? Other?

Insert text...

Who should receive the mailing:

Please select relevant boxes to the right.

Individuals

Soft Credits

Organizations

Any specific contact types?

Criteria for mailing:

Segment 1

Segment 2

Segment 3

Segment 4

Segment 5

Segment 6

Please add rows into the spreadsheet if more segments are required

Any specific record(s) you would like to include?

Excludes

Who do you want to exclude?

Below exclusions are broke into three sections. 1. Standard Exclusion from MG events, 2. Standard Direct Response and 3. Direct mail and other.

We are assuming that all MGOs will want to maintain the standard gift exclusions. However, you may apply any additional gift exclusions or list any special exclusions below and on the next page.

If a **check mark** is in the cell then we will exclude the segment of names.

1. Standard Major Gift Exclusions					
1	No Mail Ever	<input checked="" type="checkbox"/>	5	Do not mail special event invitations	<input checked="" type="checkbox"/>
2	Do Not Solicit	<input checked="" type="checkbox"/>	6	Any known record of a minor	<input checked="" type="checkbox"/>
3	Deceased	<input checked="" type="checkbox"/>	7	Any current Inova Employee	<input checked="" type="checkbox"/>
4	No Valid Address	<input checked="" type="checkbox"/>			

2. Standard Direct Response / These name are not traditionally removed from Events			3. Direct Mail and Other		
8	Exclude all states except VA, MD, DC and WV	<input type="checkbox"/>	21	Email list - (Do not send electronic e-mail newsletters, Do not send mass email communication, records coded as Requests no email, email address coded as Do not contact)	<input type="checkbox"/>
9	Only Gift in Kind Donors	<input type="checkbox"/>	22	Do Not Mail Direct Mail	<input type="checkbox"/>
10	Any donor record with a Recurring Gift Appeal ID	<input type="checkbox"/>	23	Do not Share	<input type="checkbox"/>
11	Any donor that is paying off an existing pledge	<input type="checkbox"/>	24	Direct mail – Annual Fund Solicit Only – June, Less Direct mail, Annual Fund Solicit only – January, Annual Fund Solicit only – December, Annual Fund Solicit only – November	<input type="checkbox"/>
12	All Inova Board Members (System, Alexandria, Loudoun, etc.)	<input type="checkbox"/>	25	Inova Magazine – Do not mail Inova Magazine	<input type="checkbox"/>
13	All Spouses of Board Members (System, Alexandria, Loudoun, etc.)	<input type="checkbox"/>	26	Annual Report – Do not mail Philanthropy Report	<input type="checkbox"/>
14	All Inova Leadership Council Members	<input type="checkbox"/>	27	Florida Leadership Series – Do not mail President Series	<input type="checkbox"/>
15	All Spouses of Leadership Council Members	<input type="checkbox"/>			
16	All pending gift proposals	<input type="checkbox"/>			
17	All principal gift prospects	<input type="checkbox"/>			
18	All Transformational gift prospects	<input type="checkbox"/>			
19	Leaders of Hospitals and Service Lines	<input type="checkbox"/>			
20	Philanthropy Champions	<input type="checkbox"/>			

Any special exclusions?

Standard Output Field

Below are the standard output fields. The standard output fields will be sent on all data requests. If you need any additional fields please note them in the box to the right highlighted in green.

Name	Salutation	Last Gift Amount	Last Gift Date within select
Address	Constituent ID	Last Gift Fund	Largest Gift Amount within select
City	Import ID	Last Gift Date	Largest Gift Fund within select
State	Assigned Solicitor / PMSC	Largest Gift Amount	Largest Gift Date within select
Zip	Organizations - Primary Addressee	Largest Gift Fund	Largest Gift to ___ Insert OU or SL ___
Phone (if available)	Organization - Primary Salutation	Largest Gift Date	
Email (if available)	Contact Type	Last Gift Amount within select	
Addressee	Physician Champion (if available)	Last Gift Fund within select	

Please list other fields that you require: For example if you would like just IMVH or IFMC donor information please note in the box above.

What lists outside of Raiser's Edge are required?

Report

Fill in only if applicable to your request

What is the goal of the report?

Do you want a report of donors? or gifts? or other?

Criteria for report:

Output fields needed:

Does the report need to be sorted in a specific order?