## MY STUFF BAGS PARTNER AGENCY REPORT



The My Stuff Bags Foundation requires a Partner Agency Report within three (3) months after an organization has received My Stuff Bags, even though the organization may not have distributed all the Bags received. We find this information critical in analyzing the effectiveness of the My Stuff Bags Program and essential in acquiring grants to help our organization continue to provide My Stuff Bags to the children you serve.

Please complete the following information and return this form to us at the address below or email to <a href="mailto:info@mystuffbags.org">info@mystuffbags.org</a>. The information below must be completed by a <a href="Director or Senior Manager">Director or Senior Manager</a>. Completing this form <a href="mailto:and">and</a> attaching a letter on your organization letterhead is a prerequisite for being considered for future My Stuff Bag shipments to your organization.

## **TYPE OR PRINT LEGIBLY**

1.	Organization Name:				
2.	Address:		Email Address:		
3.	City:	State		Zip:	
4.	Date My Stuff Bags Received: _		_		
5.	# of My Stuff Bags Received				
6.	# of My Stuff Bags Distributed to	o Date:			
7.	<ul> <li>Please attach a letter on your let</li> <li>(Please do not list the question)</li> <li>Information and feedback as to</li> <li>How does receiving the My St</li> <li>Please provide, if possible, a swith our supporters.</li> </ul>	ons in your letto the impact and ouff Bags help y	er, only reference the chil reaction of the chil ou to better serve ch	hem) dren receiving ildren?	a My Stuff Bag.
– Pr	int Director or Sr. Manager's Name	Director or	Sr. Manager's Signat	ture	Title