### 2022 Donor Survey

Please let us know if any of your contact information has changed

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Would you like to be added to our e-news list?

Yes  No  Already receive

1. If you already receive it, do you like and/or read our newsletter?

Yes  No

1. Would you like to be featured in a future newsletter?

Yes  No  Have already been featured

1. Are you happy with how often we communicate with you and the content of our communications?  Yes  No
2. Are you happy with the way your gifts are acknowledged?  Yes  No
3. Do you feel like you know the impact of your gifts to us?  Yes  No
4. Why do you support Radio Eye?

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1. What has Radio Eye done for you personally?

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1. Where are we in your funding priorities? Please check the highest level.

#1  Top 3  Top 10%

Top 25%  Top 50%  Bottom 50%

1. What do you love about our organization?

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1. If you could wave a magic wand and improve any aspect of our organization, what would it be?

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1. What do you think life would be like without Radio Eye?

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1. Do you have any other suggestions to improve your experience as a donor?

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1. Is there any way you’d like to be involved with Radio Eye that you aren’t currently (as a volunteer, listener, etc.)?
2. Is our organization in your will? Would you like information about bequest planning?

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**On behalf of our visually impaired and physically disabled listeners — we thank you!**