

## **DONATION REQUEST FORM**

our services into the community.
NAME OF EVENT AS IT APPEARS IN COLLATERAL METERIALS
DATE OF EVENT / DESCRIPTION OF EVENT
CONTACT NAME / EMAIL ADDRESS / PHONE NUMBER
ADDRESS TO MAIL CORRESPONDENCE
NAME OF RECIPIENT AGENCY / 501 (C) (3) TAX ID NUMBER
PURPOSE OF RECEIPIENT AGENCY:
WHAT IS THE ORGANIZATIONS CURRENT ANNUAL OPERATING BUDGET: \$
WHAT IS THE SPECIFIC GOAL OF THE FUNDRAISING ACTIVITY?
DO YOU HAVE A SPECIFIC DONATION REQUEST?
HOW DID YOU HEAR ABOUT US?
PLEASE PROVIDE ANY ADDITIONAL DETAILS:

Please note: We review donation requests on a monthly basis and aim to respond to all requests within 45 days of receiving said request. Confirmations of donations will arrive via email or regular mail. Unfortunately, we are unable to consider requests sent with fewer than 90 days notice. Please mail in or drop off your request form. We will not accept faxed requests.

The form must be filled out in its entirety or it will not be accepted.