

## **Application for Donations**

|                   |             |                          |                      | Date     |
|-------------------|-------------|--------------------------|----------------------|----------|
| Name of Charity/0 | Company:    |                          |                      |          |
| A -ll             |             |                          |                      |          |
| Address:          |             | Street Name -            | Number               |          |
|                   | City        | State                    |                      | Zip Code |
| Contact Person: _ |             |                          |                      |          |
|                   |             | Name                     | Phone                |          |
| Amount Requeste   | ed:         |                          |                      |          |
| • For what wil    | I the mone  | y be used? (General, S   | pecial Event. etc.): |          |
| How long have yo  | ou been a 5 | 601 (c) (3) organization | n?:                  |          |
|                   |             |                          |                      |          |
| Name of CEO:      |             |                          |                      |          |

• Please attach a list of your board of directors and a copy of your 501 (c) (3) letter.

The board expects to meet every 90 days to evaluate and discuss new donation requests.