



Boardman
Foods INC.

DONATION REQUEST FORM

NAME OF ORGANIZATION _____

LOCATION _____

ADDRESS _____

NAME OF PERSON SUBMITTING THE REQUEST _____

TITLE _____

PHONE NUMBER _____

EMAIL _____

WEBSITE _____

TAX ID NUMBER _____

PROOF OF NON-PROFIT STATUS (E.G. 501C STATUS) _____

WHAT TYPE OF SUPPORT ARE YOU SEEKING:

_____ MONETARY

_____ MONETARY AND PRODUCT

_____ OTHER - Raffle item or company swag

IF YOUR REQUEST IS A MONETARY DONATION, WHAT IS THE TOTAL IN DOLLARS?

IF YOUR REQUEST IS A PRODUCT DONATION, LIST THE REQUESTED PRODUCT AND QUANTITY.

IF YOUR REQUEST IS OTHER, LIST THE REQUESTED PRODUCT AND QUANTITY.

HAVE YOU RECEIVED SUPPORT FROM BOARDMAN FOODS IN PREVIOUS YEARS?

YES

NO

IF YES, PLEASE SPECIFY WHAT YOUR ORGANIZATION RECEIVED LAST AND THE YEAR.

DESCRIBE YOUR ORGANIZATION'S MISSION AND VALUES.

DESCRIBE HOW YOUR ORGANIZATION WILL USE THE FOUNDING, IF AWARDED.

HOW MANY PERSONS WILL BE IMPACTED BY THIS SUPPORT AND WHAT ARE THEIR AGES?

DATE DONATION IS NEEDED:

WHO WOULD WE CONTACT TO PICK UP THE DONATION IF NOT THE PERSON ABOVE:
