



PATASKALA AREA CHAMBER OF COMMERCE DONATION REQUEST FORM

Requirement: Organization or individual, as applicable, must attend a board meeting to present donation need for potential approval. Your project must benefit the business community in some way to be considered.

Organization/Individual Information:

Table with 2 columns: Field Name (NAME, ORGANIZATION, ADDRESS, CITY, STATE, ZIP, TELEPHONE, FAX NUMBER, E-MAIL, OTHER CONTACT) and empty input space.

Amount requested: \_\_\_\_\_ Total Project Estimate: \_\_\_\_\_

Please provide a description of the event or activity for which funding is being requested and explain the benefit that would be realized should the request be granted (or attach additional sheet.)

Multiple horizontal lines for providing a description of the event or activity.

Please give five (5) weeks advance notice. NOTE: Requests are not guaranteed to be approved or approved for the entire amount requested.

For Chamber Board Use Only:

Approved \_\_\_\_\_ Declined \_\_\_\_\_

Upon approval please note the following fulfillment decision:

Comments:

Date Approved/Denied by Chamber Board: \_\_\_\_\_

Date Response sent to Applicant: \_\_\_\_\_

Date check was sent/picked up: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_