

Charitable Request Form

The Nellis Area Spouses Club Charitable Association awards chartiable funds to Booster Clubs, registered Private Orgs, and community partners who support our local military community. For donation consideration, please fill out this form in its entirety as well as provide any necessary documentation requested. We require a 501(c)(3) tax id number, a copy of your IRS non-profit determination letter, or a completed W-9 for any and all donation requests. Completion of this form does not guarantee a donation. Incomplete requests will delay the consideration process. The more information you provide, the better we will be able to evaluate your request, so please be detailed. Charitable funds are distributed to organizations based on their indivdual needs and the services they provide to the community.

Date *

Month Day Year

Name of Organization *

Contact Person *

First Name Last Name

Phone Number *

Email *

example@example.com

Organization's Address *

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Is this the same address where payment should be mailed? *

Yes We will arrange pickup No, please send it to an alternative address.

Preferred Mailing Address *

Street Address

Street Address Line 2

City

State / Province

Postal / Zip Code

Entity Type (if known)?

Tax ID Number

XX-XXXXXXX

What is the amount of the request you are looking for? *

What is the projected date the funds will be needed? Please note we do not approve requests for events that have already happened. *

Describe exactly how the requested funds would be used. Who would benefit and how? *

How is your organization making an impact in our community? You may also enter your organization's mission statement. *

Have you requested or received funding for this project from any other source? *