Charitable Donation Request

**Directions:** Please complete the information below if your organization would like the Executive Council of Belleville Federation of Teachers Local 434 to consider a request for a charitable donation. Forms can be returned to the Local President, Building Representatives, or any member of Executive Council.

Please print or type all information for clarity.

**Part One: About Your Organization**

Name of organization: ____________________________________________________________

Briefly describe the purpose of your organization: ______________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

Does your organization hold a 501(c)(3) status? (circle) yes  no

Does your organization hold a 501(c)(4) status? (circle) yes  no

Mailing address: _________________________________________________________________

________________________________________________________________________________

Organization Phone number or email: ________________________________________________

Website: ________________________________________________________________

Contact Name: _________________________________________________________________

Contact Phone Number: ________________________________ Email: _________________________

(continued on reverse)

**Notes**

- Belleville Federation of Teachers Local 434 will consider all charitable requests on an equal opportunity basis, regardless of race, creed, color, or affiliation
- Completion of a request for a charitable donation does not guarantee a donation will be made
A new request for charitable donation must be completed each year for recurring requests.

**Part Two: About Your Request**

Briefly describe your request for funds, including the purpose of the funds:

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Our Vision: “The vision of Belleville Federation of Teachers Local 434 is to be active and engaged in the school and community.”

Briefly explain how this request reflects the Vision of BFT Local 434:______________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

Requested amount of donation: _____________________ Date funds are needed by: ____________________

Note: Requests will be considered at the monthly Executive Council meeting, so please allow a minimum of 30 days to process all requests. Requests received in June, July, and August will be considered at the September meeting.

Will you be willing to accept a lower amount than requested? (circle) yes no

If the donation will include a sponsorship or promotion of BFT Local 434 (i.e. inclusion on T-shirts, event signage, program mention, verbal acknowledgement in remarks), please describe:

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________

What is the approximate number of people who will see/hear the promotion? ____________________________

Please include any other information pertinent to your request ______________________________________