

**Charitable Donation Request Form**

Please read our Policy and Procedures form before completing the Donation Request Form. All areas MUST be filled out completely for us to process your request.

Please note the following:

- Submitting a form does not guarantee the request will be fulfilled
- A letter on your organization’s official letterhead must be submitted with this form. If you do not have official letterhead we will still accept.
- Requests must be received at least four weeks prior to the date of the event
- Items donated are based on the discretion of the Foundation
- Declined requests: The requesting organization will receive notification indicating the request has been declined.
- Approved requests: The Foundation will mail your organization when a donation has been approved; passes or voucher will be included.

**Organization**

Name\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

Phone\_\_\_\_\_ Fax\_\_\_\_\_

**Contact person**

Name\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

Phone\_\_\_\_\_ Email\_\_\_\_\_

Your position within the organization: \_\_\_\_\_

Is your organization a 501(c) 3 charitable organization? YES / NO

Briefly state the purpose of your organization: \_\_\_\_\_

\_\_\_\_\_

Name of fundraising event: \_\_\_\_\_

Date of fundraising event: \_\_\_\_\_ Date of request: \_\_\_\_\_

Briefly describe how our donation will be used: \_\_\_\_\_

\_\_\_\_\_

Please Note: A completed application is not an agreement to honor your request. A previous donation does not guarantee a donation will be offered again for a specific event or donation amount. Although we would like to support every worthwhile cause, we must focus our efforts on those that provide the most benefit to the communities we serve. We appreciate the time and efforts of your organization and wish you success with your event.

By signing this form I agree to the Foundation's Charitable Policies and Procedures.

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Signature of Requestor/Recipient of Item

Date

Submit this form, along with a request on your organization's official letterhead to:  
Neville Public Museum Foundation  
Attn: Donation Requests  
PO Box 325  
Green Bay, WI 54305  
Phone: (920) 448-7874  
Email: Katy.Maier@browncountywi.gov



For Foundation Use Only:  
Request Approved \_\_\_\_\_ Request Denied \_\_\_\_\_ If denied, reason: \_\_\_\_\_

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