



# Fundraiser Form

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FUNDRAISING ORGANIZATION

FUNDRAISER DATE

EVENT PURPOSE

NAME

ADDRESS

CITY

STATE

ZIP CODE

CONTACT NAME & POSITION

PHONE NUMBER

FAX NUMBER

eMAIL ADDRESS

MAILING ADDRESS OF CHECK

NAME TO MAKE CHECK OUT TO

ADDRESS

CITY

STATE

ZIP CODE

## ORGANIZATION'S TAX INFORMATION

FEDERAL TAX ID #

Government recognizes you as a non-profit organization?

YES  NO