



DONATION REQUEST

PLEASE READ CAREFULLY

- Must be a non-profit, federally recognized 501C-3 or community based organization
- Must be located within Erie County
- This form not intended for political issues or campaigns
- One donation per event
- Request will be reviewed approx. the 15th of each month for disbursement the following months.
- Decisions will be made based on need, benefit, prior donations, as well as budgets.
- Corso's realizes there are many worthwhile causes, all requests will be considered but not all will be funded.
- **If request is approved you will be notified by phone or email.**

FORMS NOT FILLED OUT COMPLETELY WILL NOT BE CONSIDERED

YOUR NAME			DATE
YOUR STREET ADDRESS			EMAIL ADDRESS
CITY	STATE	ZIP	DAYTIME PHONE ()
ORGANIZATION			TAX EXEMPT # (501-C-3)
ORGANIZATION STREET ADDRESS			TAX ID#
CITY	STATE	ZIP	PHONE # ()

DONATION REQUEST

WHAT IS THE OCCASION?		DATE OF OCCASION	
DONATION REQUEST			
HOW WILL PROCEEDS BE USED?			
WHO WILL BENEFIT? (How many)		WILL A PORTION GO FOR ADMINISTRATION? Y OR N?	WHAT %?

CORSO ACTION/ RECOMMENDATION