

# Kent's Market / Ace / True Value Donation/Sponsorship Request Form

**All donation requests must be submitted at least 30 days prior to the event deadline.**

**ORGANIZATION INFORMATION:** Date Form Submitted: \_\_\_\_\_

Name of Organization: \_\_\_\_\_ Tax ID # \_\_\_\_\_

Name of Person: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_ 501-c (3) Yes / No Number: \_\_\_\_\_

**EVENT INFORMATION:**

Event Name: \_\_\_\_\_ Event Location: \_\_\_\_\_

Donation Request: \_\_\_\_\_

Amount: \_\_\_\_\_ Date Needed: \_\_\_\_\_ Time Needed: \_\_\_\_\_

Pick Up Location: \_\_\_\_\_

Person picking up donation: \_\_\_\_\_ Phone # \_\_\_\_\_

Yes / No: No items were received in exchange for this/these donation(s).

**For Internal Use Only:**

Approved By: \_\_\_\_\_

Denied By: \_\_\_\_\_

Notes: \_\_\_\_\_

Form to be scanned or sent to Accounting.