



## CHARITABLE CONTRIBUTION REQUEST

The purpose of the Charitable Contributions Committee is to provide financial support to non-profit organizations who contribute to the quality of people's lives in our community.

PLEASE **PRINT** and RESPOND TO **ALL** INFORMATION REQUESTED ON THIS FORM.

501(C)3 \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Organization Name

Organization Address

City

Zip Code

Organization Phone Number

Organization Website Address

Contact Person

Relationship to Organization

Contact Person's Phone Number

Contact Person's E-Mail Address

Describe Project or Program to be Funded: **PLEASE BE SPECIFIC** - attach additional pages if needed

Please list any other donors / contributors to the project or program

Amount Required to **FULLY FUND** Project

Amount of This Request

Signature of Applicant / Requestor

Date

**Please attach a general description of your organization's programs and stated purpose.**



Submit this application to:

**Charitable Contributions Committee at Unity In Marin, 600 Palm Drive, Novato, CA 94949**