

**FOOD MATTERS MARKET AND CAFE
DONATION REQUEST FORM 9/2017**



STORE: _____

TYPE OF SUPPORT REQUEST:

CASH DONATION \$ _____

IN KIND DONATION OF _____

PRESENCE AND/OR SUPPORT OF AN EVENT _____

OTHER: _____

CONTACT PERSON: (Name, Phone #, email address)

ORGANIZATION NAME: _____

IS ORGANIZATION A 501(c)3 ____

MISSION:

WEBSITE:

DATE/LOCATION OF EVENT OR DONATION PICK-UP _____

TYPE OF EVENT _____

(e.g. RACE, COMMUNITY EVENT, SILENT AUCTION, MEETING, OTHER)

PURPOSE OF EVENT:

ESTIMATED # OF ATTENDEES: _____

**HAS FOOD MATTERS MARKET & CAFE DONATED TO YOUR ORGANIZATION
IN**

THE PAST? _____

HOW WILL OUR SUPPORT BE PROMOTED: _____

(e.g. SOCIAL MEDIA, EMAIL, SIGNAGE AT EVENT, RADIO, PRESS, OTHER)

SUBMIT FORM TO: ak@foodmattersmarket.com

