

OFFICE USE ONLY
AMT
APPROVED _____
DATE _____
PRIOR YEAR'S
DONATION _____
DISTRIBUTED
BY _____

DONATION REQUEST FORM DATE: _____

The West Wind is proud to sponsor numerous non-profit organizations with thousands of dollars each and every year. However, due to the volume of requests we receive on nearly a daily basis, we must go through a formal donation request process. Please fill out this brief form and return it to the attention of Kevin Pechacek at the West Wind ~ 709 N. Main Street ~ River Falls, WI 54022. We will evaluate and inform you of the decision within two weeks of receipt. No donation will be given to organizations failing to meet the criteria specified below.

NAME OF ORGANIZATION _____

YOUR NAME: _____ SIGNATURE: _____

ADDRESS & PHONE NUMBER: _____

YOUR POSITION WITHIN ORGANIZATION: _____

NATURE OF FUNDRAISER: _____

DATE OF FUNDRAISER: _____

LOCATION OF FUNDRAISER: _____

EXPECTED USE OF PROCEEDS: _____

In order to qualify for a charitable donation from the West Wind you must:

1. Hold "not-for-profit" status.
2. Provide a benefit for **local** area residents.
3. Demonstrate a need, and have funds earmarked for a specific purpose.
4. Apply in a timely fashion.