

DONATION REQUEST FORM

- Requests must be submitted 90 days prior to your event for review and approval.
- Applicants must be a current 501 (c) organization to be eligible for consideration.
- Please submit by e-mailing form to <u>Shantel@arthurscatering.com</u> or mail to: 860 Sunshine Lane, Altamonte Springs, FL 327 I 4

ORGANIZATION INFORMATION

Name of Organization	EIN/Ta× ID #
Address	
City, State, Zip Cell	 E-mail
Has organization received Arthur's donation before?	If yes, briefly describe
Are you or the organization an Arthur's client? If ye	es, who is your event designer?
EVENT INFORMATION	
Event Name	Date and Time
Locations of event	
Purpose of event	
How will funds raised be used?	
Short description of event details	
Request Type: Auction GC Food Donation If food, please list all food requests	· · · · · · · · · · · · · · · · · · ·
If applicable, please attach your organization's donation req	uest form
Signature of applicant	Daka
Signature of applicant	(c) non-profit organization status.
Thank you for considering us as a possible sponsor for your exprecedence. Although we will not be able to accommodate and carefully consider all incoming applications.	
FOR ARTHUR'S CATERING USE ONLY	
Date received Donation Awa	arded
Certificate # Value Notes	