

Cascade Home Center

CHARITABLE DONATION REQUEST FORM

Requests should be submitted at least 30 days in advance of an event to allow time for review.

Due to a high volume of requests, Cascade Home Center is unable to guarantee a response to every donation request. If approved, the primary contact will be notified.

An official letter of request from your organization is *required* to be attached with this form upon submission.

ORGANIZATION INFORMATION

Name of Organization:			
EIN/Tax ID#:	501(c): □ Yes □ No		
Address:			
City:		State:Zip:	
Phone:	Website:	Website:	
Contact Person:	Contact Perso	Contact Person Title:	
Contact Person Phone #:	Contact Person Email:		
	EVENT INFORMATION	N	
Event Name:	Event Date:		
Event Location:			
Purpose of Event:			
How will the money be used t	o benefit this organization?		
Type of Donation (ie.Raffle Iter	m*, Sponsorship):		
Deadline Date:		*If material items, please attach a separate itemized list.	
E-Mail completed form to marketing@	©cascadehc.com, Attn: Charitable Donations		
Employee Name:	OFFICE USE ONLY Application Status:	Gift Card #:	
Date Received:			
Authorized by:	Discount:		