

COOP Contributes Monthly Charity Application

Today's Date:
Name of organization:
Organization Contact:
Mailing Address:
Email address:
Phone number:
Website:
Tax Exempt as IRS 50I (C) (3)
Federal ID#:
Mission Statement:
How will the monthly sponsorship be used? (program, event, activity, etc)?
Thew will the menting openioneinp so doed. (program, event, donving, etc).
Do you have any seasonal fundraisers/events that we could coordinate sponsorship with?
bo you have any seasonal fundraisers/events that we could coordinate sponsorship with.
If chosen as monthly sponsored charity, how can your organization help to promote the fundraising
efforts of the Food Co-op?
enorts of the rood co op:
Other information you'd like us to consider:
Other information you a like as to consider