



VELCO Charitable Giving Request Form

**Denotes required fields*

Organization Name * _____

Address * _____

City/State/Postal Code * _____

Contact Person * _____ Phone * _____

Email * _____ Website * _____

Is your organization designated by the IRS as a non-profit or public tax-exempt organization as defined under Section 501 (c)3 of the Internal Service Revenue Code? * Yes No

What area does your organization serve? * Local Regional National

Describe service area: _____

Does the organization have any ties to VELCO's fields of expertise? *

Science Technology Engineering Math Other _____

Has the organization received a donation from VELCO in the past * No Yes. If yes, what year? _____

Does your organization need technology, such as laptops? Yes No If so, please describe:

more on reverse

Organization Name _____

Describe your organization and its mission *

Provide a brief description of the services provided by your organization and the demographics of the population served. *

Describe the activity or project for which you are requesting a contribution and how the funds will be used. *

Who will benefit this donation. Please be specific. *

Amount requested? * _____

Additional comments

Please attach a donation request letter on an official letterhead from organization headquarters. *