



McCord's Do it Best is committed to supporting the community that has supported us since 1935. As a locally owned and operated company, we believe it is our responsibility to give back to those that have helped us continue to build relationships in the area we are proud to call home.

Please complete this form and return it to the address listed below in person or via United States Postal Service. Donation requests forms should be submitted at least 2-3 weeks prior to request deadline for proper processing.

Please provide all requested information. Only complete applications will be considered.

ORGANIZATION INFORMATION

Organization name: _____ Date: _____

Address: _____ City: _____ State: _____ ZIP: _____

Contact person: _____ Title: _____ Email: _____

Phone: _____ Fax: _____ 501(c)(3) status: _____

Tax ID number: _____ Donation request: _____

Has this organization received a donation from McCord's in the past: YES NO If yes when: _____

Description of nonprofit organization (two-sentence summary of mission/ objectives): _____

EVENT INFORMATION

Project/ program/ event name: _____ Date: _____

Brief Program Description: _____

Area/ community where the event will serve: _____

How is this event being advertised/ communicated to the public: _____

For Office Use Only

Division: _____ Date approved: _____ If not approved, date notification sent: _____

Specific donation given (please circle): Gift Certificate Merchandise

Number of gift certificates: _____ Amount per gift certificate: \$ _____ Total amount: \$ _____

Merchandise description: _____ SKU: _____ Value: \$ _____

Merchandise description: _____ SKU: _____ Value: \$ _____

Required Signature (To be completed when donation is picked up)

 Name of Organization Representative and Title

 Signature of Organization Representative