



Sponsorships/Donations

Submitted on: ____/____/____

THE CHARITY

Organization Name*	First Name*	Last Name*	
Organization Address*	City*	State*	Zip*
Charitable ID #*	Email Address*		

YOUR EVENT

Event Location*	Expected Attendance*
Event Date & Time*	
Describe the objective/goal/purpose of your event*	

OUR CONTRIBUTION

How will Mountain View's name/donation be promoted?*
Requesting a specific item for donation? Describe:*
Has your organization received a donation from us before?* <input type="checkbox"/> Yes <input type="checkbox"/> No
How will our gift be used? * <input type="checkbox"/> Door Prize <input type="checkbox"/> Raffle Prize <input type="checkbox"/> Silent Auction <input type="checkbox"/> Other
If "Other," please describe: