



13090 Main Road • Akron, NY 14001

All donation requests must be received 45 days prior to the event

Contact Information:

Name: _____ Title: _____ Phone: _____

Date of Request: _____

Event Information:

Name of Organization/Event: _____

Beneficiary of Event: _____ Date/Time: _____

Location: _____

Has this organization received a donation from us in the past? Y / N

Is this organization a customer of our company? Y / N

Please describe your request: _____

Please describe any donation/sponsorship benefits: _____

Briefly describe how the funds raised by the event will be used: _____

Date donation is required by: _____

*** All requests will be evaluated on an individual basis based on the budget available each month***