



# Kiwaniis<sup>®</sup>

## DAYTONA BEACH

### Daytona Beach Kiwanis Foundation, Inc. Donation Request

- Full Name:
- Organization/Group Name (if applicable):
- Contact Email:
- Contact Phone Number:
- Mailing Address:
- City:
- State:
- Zip Code:

### Event/Donation Details:

- Event/Occasion Name (if applicable):
- Purpose of Donation:
- Date of Event (if applicable):
- Description of Event/Occasion:
- Expected Number of Attendees (if applicable):
- Donation Requested (Please Specify):

### Additional Information:

- How will the donation be used to benefit the community or organization?

- Is there any specific recognition or acknowledgment you would provide to Daytona Beach Kiwanis Foundation, Inc. in return for the donation?

- Are there any specific requirements or guidelines we should be aware of regarding the donation?

- Attach any additional documentation or materials related to the event or donation request (if applicable):

- Are you registered with IRS as Tax Exempt Organization? (our organization is restricted to allow donations only to 501©3 entities)
- Tax Exempt Number: \_\_\_\_\_
- Are you registered with Dept. of Agriculture to solicit funds?
- Registration Number \_\_\_\_\_

**Acknowledgement:** I hereby certify that the information provided in this donation request form is true and accurate to the best of my knowledge. I understand that submission of this form does not guarantee approval of the donation request, and that all requests are subject to review by the Daytona Beach Kiwanis Foundation, Inc.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## BOARD USE ONLY

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Amount: \_\_\_\_\_ Date: \_\_\_\_\_

Approved By:

\_\_\_\_\_ Date: \_\_\_\_\_

Secretary

\_\_\_\_\_ Date: \_\_\_\_\_

President