

**WABASH VALLEY COMMUNITY FOUNDATION
NOTIFICATION OF NONDEDUCTIBLE FUNDRAISING
FOR AN ENDOWMENT FUND**

FROM: (Group or Organization Name, Address and Purpose)

Organization Name: _____

Mailing Address: _____

Phone: _____ Fax: _____

Purpose: _____

FEDERAL ID # (if incorporated) _____ **501(c)(3) Status** _____

CONTACT PERSON: (This person will serve as the main source of communication between the Community Foundation and the group/organization.)

Name: _____

Position or Role in the fundraising group/organization: _____

Email: _____ Home Phone: _____

Mobile: _____ Work: _____

Best place and time to be contacted: _____

ENDOWMENT FUND to benefit from proposed fundraiser:

EVENT INFORMATION

Title: _____

Date(s): _____ Time From: _____ To: _____

Location(s): _____

Number of participants expected: _____

Please provide a detailed description of activities of the event and the group's experience in this type of fundraising. Why is the activity likely to be a success?

Has this group or have these individuals organized previous fundraising events?
 Yes No If yes, please give date, place and a brief
explanation. _____

Do any of the group members expect to gain monetarily from conducting the event?
 Yes No

Do any of these persons have connections that will benefit from the proposed event?
 Yes No

If yes, to either question above, please explain. _____

Agreement: I (We) have received the Wabash Valley Community Foundation's Donor-Initiated Fundraising procedures and will abide by its requirements for a Deductible Fundraiser.

Name: _____
Please print

Name: _____
Please Print

Title: _____

Title: _____

Signature

Signature