

Donation Request Form

Purpose

BUECI's Policy 570, Sponsoring Community and Affiliation Activities ("donation policy"), sets forth the purpose of BUECI's donations and sponsorships. Donations are primarily granted in support of events and activities benefiting the youth of the local community and given to individuals and non-profit organizations.

BUECI's complete Donation Policy is available to members for review upon request.

Requirements

All donation requests are required to provide:

- ✓ a completed donation request form (must be received by the 2nd Friday of each month)
- ✓ relevant support for the request (a budget, letter, or invitation)
- ✓ a representative present at the board meeting

Additionally, nonprofit organizations are required to provide:

- ✓ an IRS determination letter to demonstrate 501(c)(3) non-profit status and an IRS Form W-9

BUECI strives to build strong community relations by providing donations and scholarships to the local community. BUECI is proud to serve Barrow and to support organizations and individuals who are pursuing athletic, educational, and cultural goals. We look forward to working with you to enhance the lives of BUECI members!

Donation requests should be submitted to the Executive Assistant. Her contact information is:

Annie Rexford, Executive Assistant

donations@bueci.org

Tel: 907-852-6166

PROVIDING FALSE INFORMATION OR MISUSING BUECI GRANT FUNDS MAY BE SUBJECT TO CRIMINAL PROSECUTION, DENIAL OF FUTURE GRANT FUND REQUESTS AND LEGAL ACTION TO RECOVER GRANT FUNDS



REQUEST TYPE

Requestor is an	ORGANIZATION <input type="checkbox"/>	INDIVIDUAL <input type="checkbox"/>
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INDIVIDUAL REQUESTS ONLY, ADDITIONAL INFORMATION

Name of individual		Telephone	
Name of individual's parent or legal guardian*		Telephone	

Address		Email	
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Are you a high school graduate or over 18 years old?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
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*If the individual requesting a donation is a youth (not yet a high school graduate), a parent or legal guardian who is a BUECI member must sponsor the donation request.

ORGANIZATIONAL REQUESTS ONLY, ADDITIONAL INFORMATION

Name of organization	
Name of requestor	Telephone

Address		Email	
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Name of the organization's top executive / president	
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Is the organization a non-profit, registered and in good standing with the IRS?	
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Federal EIN#		IRS Form W-9 and IRS determination letter attached <input type="checkbox"/>
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GENERAL INFORMATION

Name of activity or event	
Date of activity or event	
Organization hosting activity or event, or extending invitation	

Location of activity or event	
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How will the participants, BUECI's members, benefit?	
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How many youth, adults, and/or elders are involved?	# Youth		# Adults		# Elders	
Describe how the nature of the activity or event relates to one of the following qualifying categories: Δ athletic Δ educational or other learning experience Δ cultural/promoting Inupiat heritage Δ relating to life, safety, or health Δ promoting arctic science Δ utility trade association						
FINANCIAL INFORMATION						
What is the total budget for the activity or event? Note: See sample budget form. Attach additional information if necessary.						
Describe the fundraising activities and efforts. How much will be collected in donations and fundraising? List all donations received from other organizations including the organization making the donation and the amount.						
What is the amount of your donation request to BUECI?						
How would the donation be used?						
Is this request for a general organizational support?						
If you or your organization have received BUECI grant funds in the past, have you complied with all applicable BUECI reporting requirements?						

Thank you for your request!

Sample Event or Activity Budget

COSTS

ACTIVITY/EVENT COSTS Examples: Location rental, décor, printed materials, t-shirts, professional fees, etc.

<u>Amount</u>	<u>Organization</u>	<u>Amount</u>	<u>Organization</u>
\$ _____	_____	\$ _____	_____
\$ _____	_____	\$ _____	_____
\$ _____	_____	\$ _____	_____
\$ _____	_____	\$ _____	_____

TRAVEL COST

\$ _____ Total Airfare	# tickets _____	x price per ticket \$ _____	
\$ _____ Total Lodging/hotels	# nights _____	x # rooms _____	x price per room \$ _____
\$ _____ Total Ground transportation (car rental)	# vehicles _____	x price per vehicle \$ _____	
\$ _____ Total Meals	# days _____	x # participants _____	x meals allowance per day \$ _____
\$ _____ Total Other			
\$ _____ Total Cost for Activity or Event			

SOURCES OF FUNDS

FUNDRAISING REVENUE Example: Plate sales, carwash, etc.

<u>Amount</u>	<u>Activity</u>	<u>Amount</u>	<u>Activity</u>
\$ _____	Cash contribution per participant	\$ _____	_____
\$ _____	_____	\$ _____	_____
\$ _____	_____	\$ _____	_____
\$ _____	_____	\$ _____	_____
\$ _____ Total Fundraising Revenue (anticipated or actual amounts)			

DONATIONS RECEIVED OR REQUESTED

<u>Amount</u>	<u>Organization</u>	<u>Amount</u>	<u>Organization</u>
\$ _____	_____	\$ _____	_____
\$ _____	_____	\$ _____	_____
\$ _____	_____	\$ _____	_____
\$ _____	_____	\$ _____	_____
\$ _____ Total Donations (anticipated or actual amounts)			



CERTIFICATION

I hereby certify that I am authorized to request and receive funds for the above-named organization (or myself for an individual application) and that to my knowledge the information contained in this application is correct. I agree to follow all requirements of BUECI's Donation Policy 570. I further agree that all BUECI grant funds will be used only for the purposes described in the application. I understand that misuse of BUECI grant funds may be subject to criminal prosecution and that failure to follow BUECI donation policy rules may lead to denial of future grant funding and legal action to recover grant funds.

Printed Name

Position With Organization
(if applicable)

Signature

Date: