



DONATION REQUEST FORM

Please return fully completed form to the store manager for requests under \$100. For larger requests, email to give@johnnysmarkets.com. Form must be returned at least 30 days before event/program deadline.

Today's Date: _____ Nonprofit Federal Tax ID # _____

Organization Name _____ Contact Name _____

Org. Address _____ City _____ State _____ Zip _____

Phone Number _____ Email Address _____

Request fits into one of the following categories: Fighting Hunger Wellness & Athletics Education

Veteran/ Military Support Community Support / Other: _____

Type of request (select type and fill in amount):

Gift Card \$ _____ Program / Event Sponsorship \$ _____

Ad (attach sizes/prices) \$ _____ Product Donation (attach list of items requested)

Please describe or attach details _____

Event Name _____ Date of Event _____

Event Time _____ Event Location _____

Recognition at Event: Banner or Sign Ad Logo Recognition Booth Space Social Media

Website Other _____

Signature _____

With my signature, I authorize Johnny's Markets to use photograph and/or videotape taken at the event for corporate communications materials created for Johnny's Markets, including posting on the internet.

TO BE COMPLETED BY STORE

Store Number _____

Store Manager Signature _____

Store Comments _____

STORE MANAGER, CHOOSE ONE OF THE FOLLOWING OPTIONS:

Option 1 Donation given at store \$ _____

Option 2 Recommend donation for corporate review \$ _____

Fax: 269-123-4567 or scan and email: give@johnnysmarkets.com

Please keep copy of all forms on file.