

	Office Use ONLY:
Received:	
Input:	
Decision:	

Charitable Donation or Sponsorship Request

Name of Organization:		
Specific Event & Date or		
specific objective of		
fundraising:		
Nature of Request:	Sponsor/ad purchase	Official charitable donation
	Prizes	Work/goods in lieu of monetary
Dollar amount requested:	1	
How does your request	Safety	Environment
relate to our priorities?	Energy Education	
	A local initiative to benefit the community	
When is an answer to the	Early January	Late March
request required?	Mid-June	Late September
How will this donation		'
 relate to SYNERGY 		
NORTH's Mission,		
Vision and Values?		
MVV's linked here		
 further the goal of 		
SYNERGY NORTH		
creating community		
partners?		
Receipts or Invoices are		tered charitable donation tax receipt
required:	We will provide a writte	en receipt from our unregistered group
	O We will issue an invoic	e for the sponsorship publicity you are
	purchasing	
Payment Details:		
Whom would a		
cheque be written to		
and where will it be		
mailed?		
Requestor's Contact		
Information:		

Please send this form with any additional supporting information or your letter which clearly covers the information requested above to:

Charitable Donation Request c/o Connections Committee Synergy North Corporation, 34 N. Cumberland Street, Thunder Bay, ON P7A 4L4

email to: information@synergynorth.ca