



McKenney-Salinas Honda™

Donation/Charitable Contribution Request

McKenney-Salinas Honda asks that all organizations requesting financial support to complete this form. We ask that you submit your request at least two weeks in advance of your event to allow for proper consideration. Completion of this form does not guarantee that McKenney-Salinas Honda will be able to fulfill the request, as we receive numerous requests each week. We appreciate the importance of your efforts and we do as much as we can to support our community.

| Request Information | | | | | | | | | |
|--|--|---------------|--|--------|--------------------|--|------|--|--|
| Date of Request: | | | | | Date Funds Needed: | | | | |
| Date of Event: | | | | | Amount Requested: | | | | |
| Name of Event: | | | | | | | | | |
| Legal Name of Organization: | | | | | | | | | |
| Mailing Address: | | | | | | | | | |
| City: | | | | State: | | | Zip: | | |
| Person Making Request: | | | | | | | | | |
| Title: | | | | | Phone: | | | | |
| Email: | | | | | Fax: | | | | |
| Organization Information | | | | | | | | | |
| Is this organization a 501-(c3) nonprofit agency? | | | | | YES | | NO | | |
| Is this donation tax deductible? | | | | | YES | | NO | | |
| Organization's primary mission: | | | | | | | | | |
| How will the funds be used? | | | | | | | | | |
| Will there be advertisement or promotion featuring McKenney-Salinas Honda? | | | | | | | | | |
| | | | | | YES | | NO | | |
| Please describe: | | | | | | | | | |
| Is the requesting organization or person making request a customer? | | | | | | | | | |
| | | | | | YES | | NO | | |
| Are there any employees of McKenney-Salinas Honda involved in the effort? | | | | | | | | | |
| Please list: | | | | | | | | | |
| Signature of person making request: | | | | | | | | | |
| MSH Use Only: | | Amount: \$ | | | Date: | | | | |
| | | Approved: Y N | | | Signature: | | | | |