



Williams Township 655 Cedar Press Road Easton PA 18042 610-258-6088

Contribution Request Form

Thank you for your request for a donation to your organization. Our Township wishes it were possible to provide funding to every organization that submits a need however; and understandably, that is not fiscally possible. It is our goal to assist as many worthwhile deserving recipients that are possible. In doing so, we have some specific information we require from each petitioner to ensure we are selecting qualified sources of our funds that have been entrusted to us by the citizens of Williams Township, it is our fiduciary responsibility.

Please review and provide responses to the requested information below to qualify your organization as a potential recipient of our donation.

Name of Organization _____

Address _____

Phone Number _____

Primary Contact _____

Website Address _____ Email address _____

Date of Request _____ Date funds are required _____

Please provide the Mission Statement of your organization:

How long has your organization been in existence?

What is the monetary value of your request? \$ _____

In as much detail as possible, please describe why your organization is seeking funding

Please describe to whom the benefit will be recognized by the donation.



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If you are seeking the funding for a specific “project”, please detail the Total Cost and Time Table of your endeavor. Please list or attach any bids or quotes that have been received.

What specific Cities, Townships or Boroughs are served by your organizations and which of them will benefit from our funding?

Of what other organization have your requested funding from and how much were each of those requests for?

Please describe why you feel that it would be important for Williams Township to participate in your fund raising campaign.

In addition to the information you have provided, please attach all of the following documents for consideration:

The List of Board of Directors/Members stating their professional affiliation
Approved current Budget/Special Project or Mission Budget
Copy of IRS letter approving 501 or nonprofit class

Please note, all requests are presented to our Board of Supervisors and Review Panel for discussion and approval decision. All parties will be contacted within (30) days of request. Failure to provide all requested information or full disclosure will automatically be disqualified from review.