



Charity Nomination Form

Please complete the information below and return this form at least two days before the next meeting. Email to June Berry: JuneBerry9@comcast.net. **I agree not to nominate national organizations (local chapters okay) or charities that are political or of a politically sensitive nature. I understand that my nomination may be rejected if it does not meet these criteria.**

Name: _____

Email: _____

Organization Name	
Address	
Mission Statement Populations Served Other Sources of Funds How Are Funds Used Other information	
Website	
Email address	
Is the organization a 501(c)3 non-profit?	<input type="checkbox"/> YES <input type="checkbox"/> NO

The organization agrees to not use, give, or sell the contact information of our members for additional solicitation by them or other organizations.



Non-Profit Prequalification Form (to be completed by Non-profit)

This form is to be completed by a representative of the nominated nonprofit to confirm eligibility for funding consideration. Once eligibility is verified, the charity will be added to our list of pre-qualified charities eligible for presentation and funding consideration at a future meeting.

(please print)

NAME OF ORGANIZATION	
ORGANIZATION'S WEBSITE	
ORGANIZATION TAX ID #	
CONTACT PERSON NAME	
CONTACT PERSON'S PHONE	
CONTACT PERSON'S EMAIL	
WHAT PERCENT OF FUNDS ARE ALLOCATED TO PROVIDING SERVICES IN THE GREATER PORTLAND METRO AREA?	
IF YOU RECEIVE AN AWARD, ARE YOU WILLING TO SEND A REPRESENTATIVE TO OUR NEXT MEETING TO SHARE HOW THE MONEY WAS, OR WILL BE, SPENT? (Y/N)?	
DO YOU AGREE NOT TO CREATE, SELL OR DISTRIBUTE A LIST WITH OUR MEMBERS' CONTACT INFORMATION? (Y/N)	
DO YOU AGREE NOT TO SOLICIT OUR MEMBERS DIRECTLY FOR FURTHER CONTRIBUTIONS (Y/N)?	

Signature

Date