

## Donations and Sponsorships Request Form

Please fill out the following form and return to [lisa.nazareth@wlfoods.com](mailto:lisa.nazareth@wlfoods.com) or fax to (319)627-6127 Attn: DONATION REQUEST.  
Completion of this form DOES NOT guarantee the request will be fulfilled. **Minimum 2 weeks advanced notice.**

Organization/Event Name: \_\_\_\_\_ Event Date: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Affiliation with West Liberty Foods: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

**This organization is: (please check one)**

Educational  Arts/Culture  Charitable  Institutional  Other

Is this organization a 501(c)(3) non-profit agency?  Yes  No

Please provide a copy of your government exemption certificate with this form.

Tax Exempt #: \_\_\_\_\_

What programs/services does your organization provide?

Please list items your organization is currently requesting:

Who/What will this request benefit?

Have you requested donations from West Liberty Foods, L.L.C. in the past? If yes, please explain:

**FOR INTERNAL USE ONLY**

Date Request Received:

Received By:

Approved:  Yes  No

Signature:

Prior:  Yes  No

Notes:

Date Organization Contacted: