



**Employee Foundation Committee**

**Donation Request Application**

Complete form and return to AHE Community Matters - 1389 Riverside Dr. Sidney, OH 45365, communitymatters@ahequip.net

**Applicant Information**

Name:		Date:	
Dept:		Email	
Phone #		Requested Amount \$\$	

**Organization Details**

Organization Name:		Address:	
Contact Person		Contact Person Title	
Email		Phone #	
Website		Is the organization a qualified 501(c)(3) nonprofit?	YES NO

**Donation Purpose**

Describe the purpose of the donation and how the funds will be used.

**Alignment with Foundation Values**

Explain how this request aligns with the foundation's mission and values:

**Supporting Documentation**

Please attach any relevant documents such as brochures, financial statements, or impact reports.

**Employee Endorsement (Optional)**

Is this cause supported by employees? If yes, please list names and departments:

**Signature**

Applicant Signature		Date:	
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