



**PARADY**  
FINANCIAL GROUP, INC.  
YOUR LIFE, YOUR WAY™

## DONATION REQUEST

### Organization Information

Organization Name: \_\_\_\_\_

Tax ID / EIN: \_\_\_\_\_

Nonprofit Status: \_\_\_\_\_

Website: \_\_\_\_\_

Address of Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

### Event / Program Details

Event Name: \_\_\_\_\_

Date & Location: \_\_\_\_\_

Event Type: (Examples: Golf Tournament, Dance, Straight Donation)

\_\_\_\_\_

Purpose of Event: \_\_\_\_\_

Expected Attendance: \_\_\_\_\_

How will the donation be used: \_\_\_\_\_

### Donation Request

☐ Monetary Donation \$ \_\_\_\_\_

☐ Products \_\_\_\_\_

☐ Services \_\_\_\_\_

☐ Deadline for Receiving Donation \_\_\_\_\_

## Impact & Recognition

How will our company be recognized? \_\_\_\_\_

Brief description of the charity's mission and community impact:

\_\_\_\_\_

## Donation Allocation & Compliance

Exact percentage of donations allocated to mission-related activities: \_\_\_\_\_%

Provide a clear breakdown of remaining funds (administrative, fundraising costs, etc.).

\_\_\_\_\_

## Supporting Documents (required)

- IRS Determination Letter
- W-9
- Event Flyer or Sponsorship Packet

## Agreement

☐ I certify that the information provided is accurate and that the organization is a registered nonprofit. I understand that providing false information may result in disqualification from receiving donations.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## For office use only:

Request Rec'd on \_\_\_\_\_ by \_\_\_\_\_

Item Requested & Approved:

Donation \$ \_\_\_\_\_

Products \_\_\_\_\_

Services \_\_\_\_\_

Sponsorship Level: \_\_\_\_\_

Approved by \_\_\_\_\_ on \_\_\_\_\_ Contact person notified on \_\_\_\_\_

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**[www.paradyfinancial.com](http://www.paradyfinancial.com)**