

## **CHARITABLE/COMMUNITY CONTRIBUTION REQUEST FORM**

Charitable and community contributions include those contributions offered to support local activities of community organizations, non-profit organizations and special events within the Glendale community; contributions to support the campaigns for an elected office are not included.

Organi	zation Name:		Contact	Name:	
□ * P	Non-Profit* Please attach proof of	☐ For Profit your non-profit stat		□ Other	
	Number: Day (		Evening ( )		)
		City	State	Zip Code	
1. Ple	Event or Activity S Name of Event / Ac	Sponsorship (Pleas	ntribution you are seeking.  e attach any materials that support yo		
	Date:		Location:		
	•		terials which may support your reques		
	Desired Contribution	n:			
	Other (Please attach a		support your request )		
	Desired Contribution	n:			

Please describ the City of Gler	e how your organization provides direct benefits to residents and/or businesses in Glendale or indale
Please describ	e how your organization provides a charitable or a social benefit.
	e how your organization will promote or raise awareness of the Glendale Management Please attach a list of sponsorship benefits and levels.)
Association? (F	

3. Once you have completed this form, please mail your request to the following address:

Glendale Management Association Attn: Charitable Activities Committee P.O. Box 10592 Glendale, CA 91209