

Minnesota Fish & Wildlife Alliance

Donation Request

Is this request from an:

Date: _____

Individual

Organization

Organization _____

Name _____

Address _____

Phone _____

Email _____

If an Organization, are you a charitable organization?

Yes

No

If yes, please attach a copy of 501(c)3 status letter

Requested
Amount _____

When are
the funds
needed? _____

Description of project or
reason for request _____

MFWA Use Only

Approve

Reject

Amount

\$ _____

Donation # _____

Motion by: _____

Second by: _____