DONATION REQUEST FORM

GENERAL INFORMATION

Name of Organization: _____

Contact Name: _____ Phone Number: _____

Title: _____ Email address: _____

Mailing Address: _____

City: _____ Province _____ Postal Code: _____

Are you a registered charity or Non-Profit organization? ☐No ☐Yes

Business Number (BN)/ Registration Number: _____
(as provided by Canada Revenue Agency)

Are you currently being supported by any of the following?
☐ United Way ☐ Children's Miracle Network ☐ Canadian Red Cross

Your organization's activities focus on:
☐ Children ☐ Health and Human services ☐ Education

What were your organization's revenues for the last year? _____

What is your Administration cost: _____ %

DONATION REQUEST

Donation Type: ☐ Amount: $ _____
☐ Items requested: _____

Donation required by *(Date)*: _____

Purpose of Donation *(event, auction, fundraiser, etc):*

Is this a local/regional or national initiative? ☐ Local ☐ Regional – Province: _____ ☐ National

Has your organization received support from Costco in the past? ☐No ☐Yes Yr: _____ Amount: $ _____

Will you be providing Costco Wholesale with an official tax receipt? ☐No ☐Yes

COMMENTS or ADDITIONAL INFORMATION *(limit of 800 characters – 150 words)*

SUBMIT Email completed form to CNDonations@costco.com