



CHARITABLE DONATION REQUEST FORM

All of the following information is required.

Organization: _____

Date: _____

Organization's Contact Person: _____

Title: _____

Mailing Address: _____ City: _____

State: _____ ZIP: _____ Phone Number: _____

Email Address: _____

Contact person's relationship to the organization:

Employee _____

Volunteer _____

Paid Worker _____

Fund Raiser _____

What services are rendered by your organization?

What percentage of the donation will be used to help low to moderate income individuals or families?

How will this donation be used?

Does your organization do business with Food Matters Market? _____

To whom should the check be made payable?

Signature of Organization's Officer:

- A description of your organization, including its mission and major accomplishments
- A copy of the letter from the IRS stating your organization's 501(c)(3) status, if applicable.
- Approval to use logos and organizations information for store flyer's.

Preferential consideration is generally given to requests where the following apply:

- The recipient is a local community organization in Transylvania County.
- Money donated will be spent in or on Transylvania County.
- Money donated will directly benefit the residents of Transylvania County.
- Money donated will benefit a significant group of people (as opposed to a single person).
- The Bank receives recognition for its donations.

In order to accommodate contribution requests, Food Matters Market may choose to donate promotional items that could be used by the requesting party.

Completed Charitable Donation Request applications and supporting documentation may be submitted by mail, fax or email:

Food Matters Market
Attn: Charitable Donation
1 Market Street
Brevard, NC 28712

Email:
marketing@foodmattersmarket.com

Please direct questions regarding Food Matters Market Charitable Donations Policy to Kristen Forshee at (828) 877-3657 or email KF@foodmattersmarket.com.

