



121 Sutliff Avenue, Rhinelander

715-365-4800

www.ripco.org

# DONATION REQUEST FORM

## ORGANIZATION INFORMATION

Name of Requesting Organization

Email

Contact Person

Address

Phone

Preferred Method of Contact: Circle One

Phone

Email

Text

Describe the Purpose of Your Organization

## DONATION INFORMATION

Which of our four pillars does your cause align with?

Education

Food & Housing Insecurity

Veterans and Military Families

Critical Health and Emergency Services

*(Please select one)*

**Monetary** Amount Desired

**Raffle Item** *(typically \$100 value)*

**Date donation is needed.** Must be no later than 2 weeks before desired date to be considered.

**Please describe the purpose of the donation** (Event, Auction, etc.).

**Has Ripco Credit Union provided a donation for your organization in the past?** If Yes, what was donated and when?

YES

NO

WHEN?

*NOTE: This form must be filled out completely before returning.*