



Donation Request Policy and Guidelines

The Medford Cooperative mission states that we will serve your community cooperatively and professionally. A large part of the cooperative spirit is supporting the communities that support us. We believe it is very important to contribute to organizations and issues that have an impact in these communities.

For these reasons, we focus our efforts on local, non-profit organizations that impact the following needs:

- Education: School projects, educational programs and sports activities
- Humanitarian: Health education, benefits and fundraisers
- Civic and Community: Enhancement of community life and safety
- Environmental: Protection and conservation of natural resources

Application Guidelines:

- Applications will be reviewed on the 1st and 15th of every month, so be sure to submit early.
- Organizations may only request a donation once per calendar year.
- Donation requests not on the 'Donation form' will not be considered.
- Incomplete applications will not be accepted.
- Requests for events that have already occurred or items that have already been purchased will not be approved.

Once you have completed the Donation Request Form, please send to:

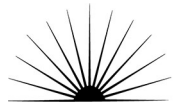
Email:

info@medfordcoop.com

Mail to:

Medford Cooperative, Inc.
ATTN: Jolene Kennedy
160 Medford Plaza, PO BOX 407
Medford, WI 54451

If you have any questions, please contact Jolene Kennedy at 715-748-2056, ext. 221.



MEDFORD COOPERATIVE

Donation Request Form

Current Date _____

Organization Information

Organization Requesting the Donation (Legal Name) _____

Organization's Non-profit Federal Tax ID (xx-xxxxxxx) _____

Organization's Address _____

Organization's City _____ State _____ Zip (xxxxx-xxxx) _____

Organization's Main Phone Number _____

Representative Information

Name of Organization's Representative (first and last) _____

Representative Address _____

Representative City _____ State _____ Zip (xxxxx-xxxx) _____

Representative Phone Number _____

Representative email address _____

Request Information

Name of Event _____

Date of Event _____

Type of Donation being Requested (circle all that apply)

Raffle basket Food Gift certificate Other (explain) _____

What will the Donation be Used for? (circle all that apply)

Drawings/raffles Feed participants Other (explain) _____

Approximate number of participants attending the event _____

Is this an annual event? Yes No

Type of recognition given to donors _____