

Charity Nomination Form

If you are a current member and would like to nominate a charity for consideration by 100+ Women Who Care Valley of the Sun, please fill out the electronic form on our website or fill out this PDF document. Completed PDF forms may be sent via email to info@100wwcvalleyofthesun.org. Please feel free to use this email template when you contact the organization for assistance in answering these questions.

Completed forms <u>must</u> be submitted at least two (2) weeks prior to the next quarterly meeting. This gives us time to ensure the charity meets our eligibility requirements. Approved charities will go "in the hat" at the upcoming meeting. Three (3) charities are drawn at random at each quarterly meeting. The nominating members will present the three (3) charities to the group. The members vote and the charity with the majority vote is the recipient of the group's donations.

NOMINATING MEMBER'S INFORMATION

Name*				
Phone Number*	Email Add	Email Address*		
CHARITABLE ORGANIZATION'S INFORMATION				
Name*	Website*			
Street Address*				
City*		State*	Zip Code*	
Contact Name*	Position a	Position at Organization		
Contact's Phone Number*	Contact's	Contact's Email Address*		
*Ouganization/a FINI Number.				
*Organization's EIN Number:				



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* Organization's Mission and Purpose				
*Who does the charity serve and how many are served annually?				
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*What geographic area is served by the charity	?			
*How does the charity impact the Phoenix Metro area?				
*How would our donation be used locally by the charity?				
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*Year organization was founded:				
*Year organization become a 501(c) 3 entity:				
*Number of Employees:	*Number of Volunteers:			



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*Has the charity ever operated under a different name? If so, what was the previous name(s)?	□ Yes	□No
*Does the organization have 3 years of 990 tax returns available for review?	□ Yes	□No
*Will any portion of the 100+ WWC donation go towards administrative fees? If so, what percentage?		
If the charity was selected to receive our quarterly donation, would someone from the organization be available to speak at the following quarterly meeting to describe the impact of the donated funds to the group?	□Yes	□No
*Does the organization agree to provide charitable tax receipts to our members?	□ Yes	□No
*Does the organization agree NOT to sell, give or use our members' contact information for solicitations by themselves or other organizations?	□ Yes	□No
*If this charity is selected by the group, to whom would the checks be payable to?		