

Dear [INSERT CHARITY CONTACT NAME],

I am a member of 100+ Women Who Care Valley of the Sun. We are a local philanthropic group of women who meet quarterly, contribute locally and connect personally to benefit well deserving charities. Our members have the opportunity to nominate local charities that touch our hearts. At each quarterly giving circle, we learn about three (3) charities. The charity names are drawn at random "out of the hat" for consideration. The members who nominated the charities give brief presentations on each charity, our group votes and the charity with the most votes is the recipient of \$5,000 - \$10,000 in donations.

I would like to nominate your organization for consideration at one of our quarterly giving circles. [INSERT WHY] To do so, I will need additional information from you to share with our group.

REQUIRED INFORMATION

1. Charity Contact, Position, Email, Address and Phone Number
2. EIN Number
3. Year organization was founded
4. Year organization became a 501(c)3 organization. *The organization must be a 501(c)3 for a minimum of three complete years to be eligible.*
5. Number of employees
6. Number of volunteers
7. Mission statement, purpose and who you serve
8. Who does the charity serve and how many are served annually?
9. Geographic area that you provide services to in the Phoenix metro area
10. Primary programs your organization offers to the community
11. How would you define the impact your organization is making in the Phoenix metro area?
12. Total revenues for most recent tax year
13. Total expenses for most recent tax year
14. Percentage of expenses that are program related
15. If you were to receive a donation from 100+ WWC, how would that donation be used?
16. Would any portion of that donation be used for administrative fees?
17. If you were to receive a donation from 100+ WWC, who would checks be payable to?
18. Do donations to your organization qualify for an Arizona Tax Credit? If so, which one?
19. Do you provide tax receipts for donors?
20. If [INSERT NAME OF CHARITY] is the recipient of our donation, do you agree not to sell, give or use our member's contact information for solicitations by yourself or other organizations?
21. If [INSERT NAME OF CHARITY] is the recipient of our donation, would a representative from your organization be available to speak at our next quarterly giving circle?

Aside from the answers to these questions, 100+ WWC requires the three (3) most recent IRS Form 990s. If your organization files a Form 990-N (e-Postcard), and you are not required to file IRS Form 990 or 990-E, our chapter requests that three (3) years of year-end financial statements be provided for our review.

Aside from potential donations, our goal is to raise awareness and exposure for local charities. It would be an honor to add [INSERT NAME OF CHARITY] to our list of approved charities.

My deadline for receiving this information is [INSERT DATE].

Thank you for your help in providing the required information and financial information to 100+ Women Who Care Valley of the Sun.

Sincerely,

[INSERT MEMBER NAME]

www.100wwcvalleyofthesun.org