

Dealine Dates:
May 1
November 1

**Edmonton Latvian Society Imanta
Donation Request Form
imantaedmonton@gmail.com**

Request Date _____

Organization name _____

Address _____

City _____

Postal Code _____

Contact Person _____

Phone # _____

Email Address _____

Registered Society # or
Charitable Society # _____

Is your organization or parent
organization resigistered with
AGLC for Casino or Bingo
fundraisers? Yes _____ No _____

Mission Statement and
description of activities _____

Community involvement _____

Proposed Use of Funds. Include
Estimated cost or Budget and
other efforts to raise funds.
Indicate how your sponsors are
acknowledged. _____

How did you hear of us? _____

Amount requested _____

Amount Approved:	Meeting Date of Approval:
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