

**REQUEST FOR NEFLC DONATION TO NON-PROFIT**  
**AGENCY/ENTITY/ORGANIZATION**

(Please print or type)

**NAME** of Agency/Organization \_\_\_\_\_

**CONTACT INDIVIDUAL:** \_\_\_\_\_

**E-MAIL** for Contact Individual: \_\_\_\_\_

**PHONE** No. for Contact Individual: \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

Type of Organization: \_\_\_\_\_

Function/mission of Organization: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Attach informational brochure or other printed material/information if available

Other Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Submitted by: \_\_\_\_\_

On behalf of \_\_\_\_\_

Printed name/Municipality

Date

***PLEASE NOTE ALL DONATIONS WILL BE REPORTED TO THE IRS ON OUR 2021/22 FORM 990***

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*Contributions of \$350 per eligible agency/entity. If a member city submits more than one application, the \$350 may be split between applicants.*

**PLEASE SUBMIT THIS FORM BEFORE June 1, 2022 along with proof of non-profit status to:**

**Betsy Jordan, Executive Director**     [neflc.exdir@gmail.com](mailto:neflc.exdir@gmail.com)

**Northeast Florida League of Cities, PO Box 262, Palatka, FL 32178-0262**

**by e-mail**

**by mail**