



Town of Eleanor  
P.O. Box 185  
Eleanor, West Virginia 25070

### Donation Request Form

*The Town of Eleanor will meet in January and July of each year to review donation and sponsorship requests. Requests should be received by December 1<sup>st</sup> and June 1<sup>st</sup> of each year.*

Date: \_\_\_\_\_ Request No.: \_\_\_\_\_

*Complete the following information about your organization. Please type or print neatly and limit the information to the space provided. Lengthy proposals are not necessary.*

Organization Name: \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Contact(s) and Title(s): \_\_\_\_\_

\_\_\_\_\_

Brief History of Organization: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Organization's Purpose: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Amount Requested: \_\_\_\_\_ Duration of Project: \_\_\_\_\_

Project Budget: \_\_\_\_\_ Date Funds are Needed: \_\_\_\_\_

Organizations Annual Operating Budget: \_\_\_\_\_

Annual Administrative Budget: \_\_\_\_\_

Summary of Project: \_\_\_\_\_

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Proof of Need: (please provide specific data): \_\_\_\_\_

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How the Town of Eleanor's contribution will be used: \_\_\_\_\_

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Funding Sources (Total for Project)

Town of Eleanor: \_\_\_\_\_

Other Sources: \_\_\_\_\_

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**Return completed form to:** The Town of Eleanor, 401 Roosevelt Boulevard,  
P.O. Box 185, Eleanor, West Virginia 25070, (304) 586-2319, Fax (304) 586-2828