



Charitable Contribution Request Form

Name of Organization/ Individual _____ Current Date _____

Address _____ City _____ State _____ ZIP _____

Contact Person/ Agency Representative _____

email _____ Phone Number

Please select the organization from which you are requesting a contribution:

☐ Click Family Foundation

☐ Jim Click Automotive Team

Is your organization a qualified 501 (c)(3) organization according to IRS definitions? ☐ YES ☐ NO Federal Tax ID: _____

Please select the primary applicable category of request : Special Event/ Program _____

Describe the event/program/activity/situation for which the funds are being requested:
(If applicable, attach available brochures, program descriptions, URL, etc...)

Date & Time of the Function _____

Has the Jim Click Automotive Team, Tuttle Click Automotive Group, or the Click Family Foundation supported your organization in the past? ☐ YES ☐ NO

If you have answered yes to the last question, please include events and dates:

Please indicate how any contribution will be allocated (i.e.: % intended for administration vs. amount that will reach end recipient)(Attach)

Will your organization allow us, as a contributor, to attend your event or advertise in any media you will be including? ☐ YES ☐ NO

If so, please indicate how many may attend and/or the type of advertising you will be including.(Attach)

Please provide a current list of business/foundation donors.(Attach)

Please provide a current annual operating budget with income and expenses. (Attach)

Please list your organization's Board of Directors and their contact information.