



Crawford Electric
A Touchstone Energy[®]
Cooperative



Donation Request Form

Cooperative Principle - Concern for Community

Contact Information

NAME OF ORGANIZATION: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PRIMARY CONTACT NAME: _____

PHONE: _____ EMAIL: _____

SUBMITTER'S NAME (IF DIFFERENT): _____

PHONE: _____ EMAIL: _____

IF REQUEST IS FROM A CONSUMER-MEMBER OF CRAWFORD ELECTRIC, PLEASE LIST ACCT # _____

Event Details

NAME OF EVENT: _____

DATE OF EVENT: _____

DATE YOU WILL NEED DONATION BY: _____

(We are requesting at least one month notice of your need.)

LOCATION OF EVENT: _____

SHORT DESCRIPTION OF EVENT: _____

FUNDS WILL BE USED FOR (BE SPECIFIC): _____

ARE YOU SEEKING DONATION BASKET, VOLUNTEERS OR CASH SPONSORSHIP?: _____

WHAT KIND OF ADVERTISING IS PLANNED FOR THIS EVENT?: _____

WILL CRAWFORD ELECTRIC BE FEATURED?: _____ ESTIMATED NUMBER OF ATTENDEES/PARTICIPANTS: _____

ORGANIZATION'S WEBSITE: _____

EVENT'S PAGE (SOCIAL MEDIA): _____

Submit Completed Form to Kortney Smart

k.smart@crawfordelec.com | 10301 N Service Rd P.O. Box 10 Bourbon, MO 65441

If you have promotional material for your event, please include a copy.