



# DONATION REQUEST FORM

**\*All requests must be in for review 90 days prior to event\***

**Today's Date:** \_\_\_\_\_

Request for: Raffle Prize \_\_\_ Donation \_\_\_ Silent Auction \_\_\_ Other \_\_\_

**Name of Event:** \_\_\_\_\_

**Sponsored By:** \_\_\_\_\_

**Location of Event:** \_\_\_\_\_

**Date of Event:** \_\_\_\_\_ **Date of Request Needed By:** \_\_\_\_\_

**Tax ID#** \_\_\_\_\_

*Is this the first time you have requested a donation of Harley-Davidson of Sacramento? Y\_\_N\_\_Don't Know\_\_*

*If donation request is granted, will there be any logo placement or store exposure for HD Sacramento? Y\_\_N\_\_Don't Know\_\_*

*Comments:* \_\_\_\_\_

*Who to Contact?* \_\_\_\_\_

*Position/Title:* \_\_\_\_\_

*Phone #* \_\_\_\_\_ *Cell#* \_\_\_\_\_

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

*E-Mail* \_\_\_\_\_

*Website: (if applies)* \_\_\_\_\_

*\*I hereby state that the information on this form is true and filled out to the best of my knowledge. I also understand that Harley-Davidson of Sacramento may choose to accept or deny request based on dealers own judgment, commitment or for any other reasons.*

**We thank you for considering us to be a part of your event or sponsorship!**

*Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_

*Please Submit Request form to dealership by:*

**Drop-off or Fax to 916-687-3677**

*Office use only: Item(s) Donated* \_\_\_\_\_

*Decision of Request Accepted \_\_\_ Denied \_\_\_ initial* \_\_\_\_\_