



Use this form as a guide for gathering information about the non profit you want to recommend as a possible fund recipient. You will likely use some of this in your five-minute presentation, should the non profit be selected from the drawing.

New members are eligible to nominate a non profit after their initial meeting. Existing members must be in good standing to nominate a non profit.

NON PROFIT ORGANIZATION NOMINATION FORM If needed, attach additional information.

MEMBER NAME _____ EMAIL _____ DATE _____

ORGANIZATION NAME _____ EIN NUMBER _____ (For certified 501(c)3 organizations)

ORGANIZATION CONTACT NAME & E-MAIL _____

ADDRESS & TEL. NUMBER _____ (Headquarters and where services are provided, if different)

MISSION STATEMENT & DATE STARTED _____ (Any history, details, information on the organization are helpful)

HOW WOULD THE DONATED FUNDS BE USED? _____

ANNUAL OPERATING BUDGET & ANNUAL OPERATING COSTS OF THE ORGANIZATION _____

WHAT ARE THE CURRENT SOURCES OF FUNDING FOR THE ORGANIZATION? _____ (e.g., annual drives, fundraisers, corporate funding)

WHAT POPULATION DOES THE ORGANIZATION SERVE & NUMBER OF INDIVIDUALS IMPACTED ANNUALLY? _____

Checks made payable to: _____

Web link for online giving: _____

Briefly describe your connection, if any, to this charity (e.g., employee, board member, etc.)

Does the nonprofit agree to send a representative to our next meeting to report on the use of the donation? Yes No

Does the nonprofit agree not to use or disclose individual donor information for any purpose? Yes No

Does the nonprofit agree that the funds must be used to benefit the Rhode Island community? Yes No

The nominated nonprofit's IRS 501(c)3 form must be submitted with this form.

WHEN COMPLETED, SUBMIT THIS FORM TO: 100womenwhocareri@gmail.com