

## Request for Information

### Gifts to Charities and Other Non-Profit Organizations

Martignetti Companies of New Hampshire, since its founding, has sought to be a force for good in the community and given its support to numerous local charitable and non-profit groups. We receive many requests for assistance which need to be reviewed before we can act on them. To facilitate this process, we request that your organization provide us the information below. Your provision of this information does not guarantee that we will honor your request, but without this information we cannot consider it.

Please be aware of the following policies governing our participation in charitable events: (1) We require a 60 day lead time prior to the event for receipt of this form; (2) We will not contribute to or participate in events of organizations involved with driving moving vehicles; (3) We will not participate in any event that takes place on the grounds of a facility used to house or educate persons under the legal drinking age; **(4) All advertising materials using our logo must be submitted to our Marketing Department for approval before being printed.**

**\*\*A contact person affiliated with the Charity and a completed W-9 MUST accompany this request for consideration\*\***

501(c) IRS Number: \_\_\_\_\_ Organization Name: \_\_\_\_\_

Contact Name/E-Mail/Phone: \_\_\_\_\_

Local       National      Is our contribution tax deductible?       Yes       No

Briefly describe how the money is used: \_\_\_\_\_

\_\_\_\_\_

What percentage of the money raised goes to the charity? \_\_\_\_\_ %

How or by whom were you referred to Martignetti? \_\_\_\_\_

If a fundraising event is involved, please fill in this section:

Date of event: \_\_\_\_\_ Time Frame: \_\_\_\_\_ Expected attendance: \_\_\_\_\_

Description: \_\_\_\_\_

Entrance Fee:       Yes       No      Repeat event:       Yes       No

If yes, how much money was raised last year? Gross: \$ \_\_\_\_\_ Net to Charity: \$ \_\_\_\_\_

Request:       Monetary sponsorship       Wine and/or spirits       Participation

Specifics of request: \_\_\_\_\_

Facility name and address: \_\_\_\_\_

Does the facility have a NH State Liquor License ?       Yes       No

Have you contacted NH Liquor Enforcement for a One Day Charity license?       Yes       No

Will Martignetti be the exclusive alcoholic beverage sponsor?       Yes       No

If not, please explain: \_\_\_\_\_

What, if anything, is being provided in return for this sponsorship? \_\_\_\_\_

*\*\*Please include your organization in the Subject Line*