



Ben Petrzilka memorial foundation inc
 15118 Robin Cir.
 Omaha, NE 68138

Donation Request Form

Date Received:

Organization Name:	
Beneficiary of Request:	
Address:	
Contact Name:	
Contact Phone Number:	
Contact Email:	
Organization's Website:	
Date Contribution Needed:	
Donation Request Type: <small>*All requests must be received 90 days prior to when it is needed.</small>	<input type="checkbox"/> Financial Contribution Amount: \$
<p>Please attach a statement explaining the following:</p> <ul style="list-style-type: none"> A. Your project/goal in specific detail, including how the funds will be used. B. Project date by which the funds would be needed. C. Total project budget and timeline. D. Requested amount (\$5000.00 maximum). E. The specific benefit to the children that this project would fulfill. <p>FAQ:</p> <p>*If we have helped your camp in the past can you apply again? YES</p> <p>* Do we help at camps outside of the United states? NO</p> <p>* Is there a stronger consideration for camps in the Midwest? YES</p>	
Office Use Only: <input type="checkbox"/> Approved by: <input type="checkbox"/> Denied by: <input type="checkbox"/> Date:	Office Use Only: Actual donation:

Mail Requests to:

Ben Petrzilka Memorial Foundation Inc. 15118 Robin Circle Omaha Ne 68138