

## **Charitable Contribution Request Form**

Please complete this form at least two months prior to your event and email it to the Elite Parking Services of America, Inc. accounting department: accounts@eliteparkingsoa.com. Please write or type legibly.

Name of non-profit organization:
Mailing address:
Contact person:
Phone number:
Name of event:
Date of event:
Federal Tax ID#:
Contribution requested (e.g. funds, food, services):
Estimated number of attendees at event or people receiving donation:
Describe the demographic composition of the anticipated attendees (e.g. geographic location, male/female, age, special interests - sports, education, child welfare, etc.)
What publicity is planned for the event? Will Elite Parking Services be included in publicity (e.g. press releases, interviews)?
What opportunities will be available to display the Elite Parking Services logo?

**Please note**: You will be contacted about your request; due to the number of requests received on a daily basis, calls cannot be accepted to check their status.