

## **SHARITY'S CHARITY**

**Donation Request Questionnaire** 

Business Requesting Assistance				
Busine	ess Address			
	(Street Address)			
	(City, State, Zip)			
Phone	Number			
	(Main)			
	(Contact Person/Ext)			
	(Fax)			
Compa	any Email			
	(Main)			
	(Contact Person)			
	BUSINESS QUESTIONS  PLEASE ANSWER QUESTIONS IN DETAIL  (Please note that all donations made through this app will be made in Crypto Currency)			
1)	How long has your business been in existence? Conception date?			
2)	What is your mission?			
3)	Does your busines hold a valid and current 501c3 tax exempt status with the IRS? (yes on no)			
4)	) If yes, what is your EIN Number?			
5)	Is your business in good standings? (Yes or No)  If no, please tell us why?			
6)	6) Are there any pending or expected litigations involving your organization? (Yes or No) If yes, please explain			

7)	Does any employee/volunteer have a criminal background, is awaiting trial, or have a pending criminal or civil case pending. (Yes or No)				
8)	How many employees does your organization have?				
9)	Is your organization operated by a board of directors or a person?				
10)	10) Are you and/or any employees paid a salary? (Yes or No)				
11)	11) What are the long- and short-term goals of your organization?				
12)	On average, how many people do you service annually?				
13)	Do you service men, women, children or a combination?				
14)	Do any of the people you serve need to be helped confidentially? If so, why?				
15)	How does your organization maintain ethical standards?				
16)	16) In your opinion, what areas of your organization need improvement?				
	USAGE QUESTIONS PLEASE ANSWER QUESTIONS IN DETAIL				
1)	If awarded, how would the donation be used?				
2)	Have you ever received donations in the past? If so, how were the donations used?				
	If granted, proof of what the donation was used for will need to be provided. Are you willing to provide that proof? (Yes or No)How soon would you need assistance?				

		Title of Person Signing	-
		Signature	Date
<b>3</b> -		Print Name	
I agre	e to the above statemer		
questi misco inforn appro accep	ions truthfully and to the nstrue any information. nation to the best of my val or denial of receiving	ACKNOWLEDGEMENT OF TRUTH  te this document, and I acknowledge best of my knowledge. I have not tried of any addition information is needed knowledge and in a timely manner. It is funds or goods is expressly the decisionalice. I am aware that falsifying informsecuted.	ed to hide, conceal or I, I am willing to provide that understand that the ion of <b>SHARITY</b> and I will
Please	e explain the reason for r	not agreeing to the use of pictures and	d videos:
. 40 11	or agree to pictures and	Signature	Date
	e to the use of picture and ot agree to pictures and	Signature	Date
and vi and vi ackno	deos may be necessary, deos, please sign below. wledging that and explai	·	agree to the use of pictures
		USE OF PHOTOS OR VIDEOS	
6)	our principals? "We be color, sex, national orig	inatory organization. If accepted will lieve everyone should be treated equalin, religion, age, disability, marital stastic protected by law." If yes, please p	ally regardless of race, creed, tus, citizenship, pregnancy,
,		•	If yes, please tell us.
٦)	can you provide any other important information about your organization to help wi		

## **IMPORTANT TAX INFORMATION**

Please note: The donations received by way of Sharity or businesses/persons working with Sharity will be 100% tax deductible.

By signing below you are agreeing with the statement above and your understanding of its content. You are also giving consent for Sharity to provide a receipt for the donation on your behalf.				
Print Name	Date			
Signature				