



THEPRINTSHOP

CONTRIBUTION REQUEST LETTER OF EXPLANATION

Thank you for thinking of The Print Shop to participate in your event. We sincerely hope we will be able to help you with a contribution.

We receive hundreds of requests each year for contributions from every organization you can imagine. As community-minded citizens, we favorably reply to and participate in as many as we possibly can. However, in order to be fair to everyone and to maintain some organization and documentation within the decision-making process, we must require that everyone complete and return our Contribution Request Form in its entirety. You may attach any additional literature that you feel might be helpful.

Please return the form to us either by fax, by mail, email, or in person. Our business hours are Monday through Friday 8:00am to 5:30pm. Our fax number is 912.355.5381; email to contributions@theprintshop.net; or you may mail your request to us at "Contributions" 312 Mall Boulevard, Savannah, GA, 31406. All requests must be submitted by the first day of the month in which you wish to be considered. All requests for the month will be determined during the first week of every month. We will respond to your request by telephone, fax, or e-mail.

We wish you great success with your event and sincerely hope that your efforts will make a difference in the lives of the people in your community. Again, please ensure that your contribution is received no later than the first day of the month in which you would need to pick up the donation.

Thank you,

President, The Print Shop of Savannah, Inc.

OVER FOR CONTRIBUTION FORM

THE PRINT SHOP CONTRIBUTION REQUEST FORM

Today's Date: _____

Agency/Organization Name: _____

Contact Person: _____ Phone #: _____

Is there a parent agency? NO YES If yes, name of parent agency: _____

Are you a 501c3? (Government certified not-for-profit organization) YES NO

Are you currently a regular Print Shop customer? YES NO Not yet, but will be soon

If YES, what do think your organization purchases from The Print Shop on a monthly basis?

under \$50 \$51-\$150 \$151-\$500 \$500+

Describe your agency and what it does for the community: _____

Describe the program or event for which you are requesting the contribution: _____

What is the duration of the event? (1 day, 1 evening, 1 week, etc.) _____

Who will benefit from this event? _____

How will you measure the success of this event? _____

How will this event be publicized? _____

When do you need a decision? _____ When do you need the contribution? _____

Have we contributed to your organization in the past? If yes, indicate the date(s) of contribution(s) as well as a description of our contribution: _____

NOTE: This form must be completed by the organization in its entirety prior to being accepted for approval consideration. Please insure this form is receive by The Print Shop no later than the first day of the month in which the contribution is to be made.

WE WISH YOUR EVENT WELL AND HOPE WE WILL BE ABLE TO PARTICPATE!

FOR OFFICE USE ONLY:

Contribution description: _____

Value of contribution: _____ W/O Number: _____

Approval: _____ Date: _____

Decision justification: _____

TPS Purchases: 1999 _____ 2000 _____ 2001 _____ 2002 _____

TPS Contributions: 1999 _____ 2000 _____ 2001 _____ 2002 _____