

CUMMER MUSEUM

IN-KIND DONATION REQUEST

Requests must be made at least 30 days prior to the event for consideration and fulfillment.

Organization Name:		EIN:	
Address:			
City:	State:	ZIP:	
Contact Name:			
Phone:	E-mail:		
Event Name:		Event Date:	
Fundraiser Type:	<input type="checkbox"/> Auction	<input type="checkbox"/> Raffle/Drawing	<input type="checkbox"/> Other _____

Please provide a brief description of the event and what funds raised would support:

Additional Notes:

Please email this form along with the organization's proof of 501(c)(3) status to giftinkind@cummuseum.org. Accepted proof includes an official determination letter, Form 990, or certificate of tax exemption.