

Organization Submission

Nominating Member's Name:	
Signature:	
Name of Organization:	
Address:	
Website:	
Mission Statement:	
The Organization serves the following population:	-
The donated funds would be used to:	
The Organization's current sources of funding are:	-
The Organization is a registered not-for-profit/charity able to provide tax receipts. Charitable Registration Number #	Y / N -
If the organization you are nominating is not registered, please provide the registered no organization who will be sponsoring the organization with their charitable registration N	•
Sponsor Name Charitable Registration Number #	_
If selected, someone from the Organization will/will not be available to speak at our next meeting to describe the impact of the donated funds.	Y / N
The Organization agrees not to sell, give or use the 100 men who give a damn contact information for solicitations.	Y / N
The Organization agrees that none of our donation will be used for administration costs.	Y / N
If selected, cheques should be made payable to:	