DONATION REQUEST FORM

INSTRUCTIONS: Please complete this form and W9. Provide any supporting documents necessary with your request (event flyer, fee schedule, sponsorship bracket, tribal affiliation, etc.)

Name of Requester	On Behalf of	On Behalf of			
Phone Number	Email				
Address	(City	State	Zipcode	
	DONATION IN	IFORMATION			
Date of Request	Value or Amount Reque	stad	<u></u>	ate for Funding	
Please Describe the Natur	·				
Have you received a donation from the Peoria		Will there b	Will there be other community partners		
Tribe or Buffalo Run Casino & Resort in the past year?		providing su	providing support?		
Is this a one-time request for support?		-	Is the organization affiliated with the Peoria Tribe or any other Federally recognized tribe? Yes INo		
How will this request pror	note a positive impact for the o	community or the	Peoria Tribe?		
Signature			Date		

If approved, make check payable to

