COMMUNITY GIVING REQUEST FORM

2017 Fiscal Year
(Oct. 2016 – Sept. 2017)

Please take the time to complete each section.
Either scan and return via-email to LEMarketing@lakelandelectric.com

Or mail it to the address below:

Lakeland Electric
Attention: Kelly Kautz/Utility Marketing Programs Coordinator
501 E. Lemon Street
Lakeland, Florida 33801-5079

This form is available online at http://www.lakelandelectric.com/your-utility/community-sponsorships.

In order to be considered for the **2017 budget year (October 2016 – September 2017)**, all requests must be received by **August 1, 2016**.

Non-Profit Organization*

_____
Name

_____
Address

_____
City *Zip*

Is this non-profit organization located in the Lakeland Electric territory?
YES_____ NO_____

Does this non-profit organization serve the public within the Lakeland Electric territory:

a. To a great degree
b. To a moderate degree
c. To a minimal degree
d. No

Key Contact Information

_____ _____
Name *Email Address*

_____
Address *City* *Zip*

_____ _____
Phone *Fax*

Organization Board Members

Name	*Address*	*Telephone*
Name	*Address*	*Telephone*
Name	*Address*	*Telephone*
Name	*Address*	*Telephone*
Name	*Address*	*Telephone*
Name	*Address*	*Telephone*
Name	*Address*	*Telephone*
Name	*Address*	*Telephone*
Name	*Address*	*Telephone*

How long has organization existed? _____

If less than two years old, please provide three references:

_____

_____

_____

Funds Request

_____ _____

Name of Event/Program *If an event, please provide date*

_____ _____

If an event, please provide location *If an event, please provide time*

Dollar Amount Being Requested $. Total Project Cost $.

Funding Payment Requested by _____

Date

Purpose for Requesting Funds

_____

_____

_____

_____

_____

_____ _____

Target Audience (e.g. at-risk children) *Estimated Audience*

Has Lakeland Electric sponsored this event in the past? If yes, please explain:

_____

_____

_____

Is the event/program being funded by others? If yes, please list major sponsors.

_____

_____

_____

_____

Is the City of Lakeland providing any additional funding or support? If yes, please explain.

_____
_____
_____

How will the funds be utilized?

_____
_____
_____

Organization(s) co-sponsoring the event:

_____ _____
_____ _____
_____ _____

Please state the need for the event/program and what is proposed to meet this need.

_____
_____
_____
_____
_____
_____

Please provide specific details of how you plan to accomplish/attain the proposed event/program. List any significant community benefits.

_____
_____
_____
_____
_____
_____

How will the event benefit Lakeland Electric customers?

_____
_____
_____

Please attach any other documentation that would be helpful in evaluating the request.
***Non-profit organizations should include documentation verifying tax status.**