



Charitable Donation Criteria and Request Form

Please mail all requests to:

Spencerport Area Chamber of Commerce
PO Box 7
Spencerport, NY 14559

The Spencerport Area Chamber of Commerce supports Community Events, Programs, and Events that enhance our local business community, and Programs that promote business education.

Prior to each Calendar Year the Chamber develops a limited donation budget for the upcoming year. Each request for a donation will be considered on an individual basis and will be for a single budget year. A new request must be submitted each year.

All donation requests must be received, in writing, 90 days prior to the event to insure the Chamber has sufficient time to act on the request.

Donation requests that appear to further enhance/support our local business community will receive preferred consideration. Any requests that do not appear to enhance our local business community will be reviewed.

Date of request: _____ Date donation is needed by: _____ Amount being requested: _____

Estimated total cost of your Event/Program: _____

Name of Event/Organization: _____

Contact Person Name: _____ Phone: _____

Address: _____

Email: _____

Purpose of request (how does this event enhance our local business community?)

Contact Person's Signature

Date

For Spencerport Area Chamber of Commerce only:

Funds approved/denied by action of the SACC Board of Directors on: _____