

Abington Heights Civic League, Inc.

## 2025 Donation Application Form

## The AHCL, Inc. must receive the completed form by May 1st, 2025.

The following organization requests of (AHCL):	onsideration for a donation award from the Abington Heights Civic League, Inc.
Date of application:	Advocate Name:
Tell us about your Organization: Org. Legal Name:	
the award payment, if any, will be sen	fficial written communications, including the notice of donation award or regret and it):
Address 2:	
City:	State: ZIP:
Org. Website:	
Please attach proof of the organizatio copy of your prior year IRS Tax Form	(EIN):
Contact Person (This is the individual	we will reach out to if we have any questions.):
Name:	Phone:
Email:	
Tell us about your donation reques	wit: What is the amount you are requesting: \$
number of people that will be served by	on: How do you expect to use our donation if it is awarded? Can you estimate the by this donation? If you are awarded a donation and your organization needs it vent, please include that information. Are there any other factors that you would its request?
If you have sponsorship levels that incontribution, please include/attach that	clude benefits such as listing AHCL in a program or otherwise recognizing our at information.
If yours is a national organization, we should include on the award check to	would like our donation to be used locally. Please note the specific wording we facilitate that:

The official registration and financial information of the Abington Heights Civic League, Inc. may be obtained from the Pennsylvania Department of State by calling toll free, within Pennsylvania, 1 (800) 732-0999. Registration does not imply endorsement.

Award decisions will be made based on the type and number of requests AHCL receives as well as the funds AHCL has raised throughout the year. We understand that each requesting organization does worthwhile work and we would like to fulfill all requests, but the reality is that sometimes we can't.