



Co-op Market Grocery & Deli Donation Request Form

Co-op Market is proud to work with others in our community to enhance quality of life for our friends and neighbors. Please review our Donation Policy before submitting your request.

Organization Name United Way of the Tanana Valley

Contact Name Jolee Giuchici

Phone 452-7211 Email jolee.g@unitedwaytv.com

Type of Organization:

- Agricultural
 Environmental
 Health-oriented

- Educational
 Community
 Other: _____

Have you received any donations from Co-op Market within the last year? Y / N

Type of donation you are requesting:

- Gift Certificate
 Gift Basket
 Food

- Lend-a-Hand Register Round-up*
 Sponsorship

**If you are submitting a Lend-a-Hand request, please include on your letterhead a detailed statement of your organization's goals and how the donations will be used to meet them.*

How will Co-op Market's participation be recognized? We will market this

campaign on all our social media outlets, our

workplace campaign + you will be thanked
publicly at our campaign celebration

If your request is being made for an event, please provide the following information:

Event Name/Date _____

Description of Event _____

Estimated Attendance _____

Please send along with your request:

- Any additional materials (flyers, posters, brochures) that represent your organization or event.
- Proof of non-profit status (501C3), if applicable.

Thank you for your interest in Co-op Market and for the valuable work you do for our community!