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Charitable Contributions*

Da	te of Request: (Preference is 90 Days Prior to Event)
Or	ganization Name:
Or	ganization ID #:
	ldress:
Со	ontact Person/Number:
*C	Qualified Organizations - Circle number below or see Promotional Contribution Form on reverse side
	paritable contribution made to, or for the use of, any of the following organizations that otherwise are qualified under ction 170(c) of the Internal Revenue Code:
1.	A state or United States possession (or political subdivision thereof), or the United States or the District of Columbia, if made exclusively for public purposes;
	A community chest, corporation, trust, fund, or foundation, organized or created in the United States or its possessions, or under the laws of the United States, any state, the District of Columbia or any possession of the United States, and organized and operated exclusively for charitable, religious, educational, scientific, or literary purposes, or for the prevention of cruelty to children or animals;
	A church, synagogue, or other religious organization;
4.	A war veterans' organization or its post, auxiliary, trust, or foundation organized in the United States or its possessions;
5.	A nonprofit volunteer fire company;
 7. 	A civil defense organization created under federal, state, or local law (this includes unreimbursed expenses of civil defense volunteers that are directly connected with and solely attributable to their volunteer services); A domestic fraternal society, operating under the lodge system, but only if the contribution is to be used exclusively
	for charitable purposes;
8.	A nonprofit cemetery company if the funds are irrevocably dedicated to the perpetual care of the cemetery as a whole and not a particular lot or mausoleum crypt.
ha	Per IRS Laws, ALL charitable deductions of ANY amount must have a receipt. An individual contribution over \$250 must twe an acknowledgment letter from the charity that shows the date, amount and states that no goods or services were ceived for the contribution.
Da	ate(s) of Event:
Na	ame of Event:
Νι	umber of Persons Attending the Event:
Со	ommunity Impact:



Promotional Contribution-Events/Sponsorships

Date of Request:	_ (Preference is 90 Days Prior to Event)		
Organization Name:			
Date(s) of Event:			
Number of Persons Attending the Event:			
Describe Event:			
Community Impact:			
Event Visibility (TV, Radio, Newsprint, etc):			

Promotional Events/Sponsorships are not charitable contributions and therefore fall under our marketing program and do compete against our current marketing plan.

Attach any additional documentation/promotional information for consideration.

If your request is approved we will contact you.

The Range of Richfield LLC is independently owned and operated. All requests will be considered. However, due to the high volume of requests we receive, not all can be supported.