



ABN 95 109 758 054 ACN 109 758 054

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DONATION APPLICATION FORM

ATTENTION: *Management Board*
EMAIL: admin@orangecouriers.com.au
SUBJECT: *Donation Request*

| | | | | |
|---|--|------------------------------|--|-------|
| Name of Charity/Organisation: | | | | |
| Are you a not-for-profit | | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Date: |
| Contact Name: | | Title / Role: | | |
| Mailing address: | | | | |
| City: | | State: | Postcode: | |
| Contact phone number: | | Contact email: | | |
| Website of Organisation: (if any) | | | Date Needed / Date of Event: (If applicable) | |
| Please briefly explain your request: | | | | |
| What is the primary focus of your organisation? | | | | |

Who will benefit from this donation?

What portion of the funds will go to the beneficiary?

Do you require the donation through logistical support services or a monetary donation?

Are you able to publically recognise Orange Courier Service for donations?

Notes

- Each organisation is limited to one request per fiscal year.
- All decisions regarding donations are made on the policy criteria listed on our website.
- Notification regarding a decision will be made within 7 days of submission of application.

Signature

Printed Name