



CHARITY PREQUALIFICATION FORM

If you would like to nominate a 501(c)(3) charitable organization for consideration by **The Power of 100 People Who Care – Corvallis/ Benton County** chapter, please complete this form.

If you have questions, contact powerof100pwc@gmail.com

Nominating Member's Name:	
Nominating Member's Email Address:	
Charitable Organization's Name:	
Contact Person at Charitable Organization: (name & title)	
Contact Person's Phone Number:	
Contact Person's Email Address:	
Organization's Website:	
Is the organization a registered 501(c)(3) charitable organization?	Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure <input type="checkbox"/>
If selected, checks should be made payable to:	
If selected, someone from the organization will be available to speak at the following meeting to describe the impact of the donated funds	Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure <input type="checkbox"/>

Completed form should be scanned and sent via email to powerof100pwc@gmail.com or brought to a quarterly chapter meeting