



Community Relations Donation Request Form

To be completed by organization representative

Please attach the following information on organization letterhead:

- Detailed description of the event/organization to be sponsored
- Description of all sponsorship levels and benefits

Enclose a signed copy of your organization's W-9.

Date of application:	Date response needed:	Event Date(s):	Benefiting Charity:
Organization:		Event:	
Location:		Primary Contact:	
Telephone:	Ext:	Fax:	
E-mail:		Website: www:	
Physical (Street) Address:			
Mailing address:			
Suite/Flr/Unit#:	City:	State:	Zip:
Hannaford stores in proximity (list):		Attendees/Participants Daily Attendance:	Total Event:
Type of Support Requested <input type="checkbox"/> Amount: \$ <input type="checkbox"/> Gift Card(s): Qty Amt/ea: \$ <input type="checkbox"/> Product (List here or attach request):			
ARTWORK SIGNAGE REQUESTED (check/fill out all that apply - attach details for additional needs)			
Ad – Date needed: *minimum of 3 weeks from due date required for processing Width: Height: (Check one): <input type="checkbox"/> Blk&White or <input type="checkbox"/> Color <input type="checkbox"/> Electronic file e-mail to: (Check one) Electronic file format: <input type="checkbox"/> Eps. <input type="checkbox"/> Pdf. <input type="checkbox"/> Jpeg. <input type="checkbox"/> Other:		Logo – Date needed: *minimum of 2 weeks from due date required for processing Width: Height: (Check one): <input type="checkbox"/> Blk&White or <input type="checkbox"/> Color <input type="checkbox"/> Electronic file e-mail to: (Check one) Electronic file format: <input type="checkbox"/> Eps. <input type="checkbox"/> Pdf. <input type="checkbox"/> Jpeg. <input type="checkbox"/> Other:	
Banner – Date needed: *minimum of 4 weeks from due date required for processing Qty: Size:		Table Sign – Date needed: *minimum of 2 weeks from due date required for processing Qty:	
<i>Official Use Only</i>			
Store number(s) with location(s) for budget allocation:			
Request approved for: Money order \$ Check \$ Gift Card: Qty \$/Ea			
Authorizing Manager:		Signature:	

Local Events: Submit to your local Store Manager

Regional or Major Events:

ME & NH submit request to: Hannaford Community Relations, PO Box 1000, Portland, ME 04104

MA, NY & VT submit request to: Hannaford Community Relations, 970 Route 9, Schodack Landing, NY 12156