

# Charity Request Form 2018



**SCCC**  
— STATE COMBINED —  
CHARITABLE CAMPAIGN

## Instructions:

- Please fill out ALL of the information below and submit at least 2 weeks prior to event date.
- Please e-mail request to [sccc@launitedway.org](mailto:sccc@launitedway.org) or fax to (225) 341-2913.

## Campaign Coordinator Information:

\_\_\_\_\_  
*Campaign Coordinator Name*

(\_\_\_\_) \_\_\_\_\_  
*Phone Number*

\_\_\_\_\_  
*Agency Name*

\_\_\_\_\_  
*E-Mail Address*

## Charity Request:

I would like to request the following:

**Event Speaker**  
# of speakers needed = \_\_\_\_\_

**Charity Fair**  
# of charitable organizations needed = \_\_\_\_\_

\_\_\_\_\_  
*Date of Event*

\_\_\_\_\_  
*Arrival Time*

Brief description of your event: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Location of Event (physical address): \_\_\_\_\_  
\_\_\_\_\_

Event Contact for Charity Presenter(s):  
(in the case of an emergency this is the contact the charity should reach out to)

\_\_\_\_\_  
*Name*

(\_\_\_\_) \_\_\_\_\_  
*Phone Number*

Please provide helpful information for the Charity Presenter: where to park, building number, department name and what they should bring (i.e. if they are allowed to bring a video (DVD) about their charity, materials and supplies needed for a charity fair, etc.) : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE:** Please immediately call (225) 218-2613 or e-mail [sccc@launitedway.org](mailto:sccc@launitedway.org) if any information changes and/or if this request needs to be cancelled.

### TO BE FILLED OUT BY PCFO:

Date received: \_\_\_\_\_ Date e-mailed to charities: \_\_\_\_\_

Responding Charity(ies): \_\_\_\_\_

Confirmed Charity(ies): \_\_\_\_\_