

# DONATION REQUEST



To be considered for a donation, please complete this form and return it to: [communications@ssmpuc.com](mailto:communications@ssmpuc.com)

## **PUC Services Inc.**

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Name of organization:

Street address:

City:

Postal Code:

Province

### **Contact Person**

First name:

Last name:

Phone number:

E-mail:

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Is your organization a non-profit or registered charity?

Yes

No

Requested item or amount:

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Which one(s) of our guiding principals (pillars) does your request fit?

STEM, which includes Science, Technology, Engineering and Mathematics

Employee-Related Causes that include corporate gift matching, and volunteer approval

Health, Safe and Active Lifestyles for Children

Hallmark Community Event Participation

Description of event:

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Where and when will the event take place?

Has your organization received funding from PUC Services Inc. in the past?

Yes      No

If so, when and how much?

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What specific benefits/outcomes will be realized with this donation?

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When do you need to receive the donation?