























Pyramid Foods Donation Application

Pyramid Foods Giving Program is dedicated to helping non-profit organizations in our stores' local communities with limited budgets and big hearts. Our giving program supports organizations that address community issues such as: hunger relief, education and health and human services. Our focus is to support innovative groups that strive to make the world a better place.

Pyramid Foods Giving Program does not provide additional support, monetary or otherwise, to organizations currently receiving funds from the Price Cutter Charity Championship, American Cancer Society or other Pyramid Foods sponsored events or organizations.

Groups are invited to apply for support in the form of gift cards or product donations (such as fruit, water, snack foods, etc.) for large or small community events or charity auctions. To apply for a donation, please complete the application in full. Incomplete applications will not be considered for a donation. Attach your organization's 501(c)3 form or appropriate tax designation letter. Organizations must apply at least 21 days in advance of when they require the donation. Organizations may only apply for and receive a donation once every six months.

Please note: A completed application does not quarantee a donation from Pyramid Foods. We like to help as many organizations in our community as possible, so a previous donation does not ensure continued support.

> *Please return completed form to:* **Pyramid Foods General Offices** Attn: Donations Department 1878 South State Highway 125, Rogersville, MO 65742 Phone: 417.829.9200 • Fax: 417.829.9208

























Pyramid Foods Donation Application

		TODAY'S DATE	
ORGANIZATION NAME			
CHARITABLE NON-PROFI	T 501(c)3 OR APPROPRIA	TE TAX DESIGNATION # (ATTACH	COPY OF CERTIFICATE)
STREET ADDRESS			
CITY		STATE	ZIP
CONTACT NAME		CONTACT TITLE	
PHONE NUMBER		FAX NUMBER	
EMAIL			
PLEASE CHECK ONE CATE	EGORY THAT BEST DESCRI	BES THE PRIMARY SERVICE YOUR	ORGANIZATION PROVIDES:
☐ HUNGER RELIEF	☐ EDUCATION	☐ HEALTH & WELLNESS	SOCIAL SERVICES
WHICH STORE DO YOU S	HOP AT MOST FREQUENT	ΓLY?	
NAME			
WHAT TYPE OF CONTRIB	UTION ARE YOU SEEKING	FROM US? (PLEASE GIVE SPECIFI	(CS)
	N		
	,		

PLEASE GIVE SPECIFICS:
(EVENT DESCRIPTION, PREFERRED PRODUCT(S), QUANTITY, DATE NEEDED BY, ETC.)
NAME OF EVENT:
DATE OF EVENT:
LIGHT ARE VOLUME FOR ACTING VOLUME FUENTS
HOW ARE YOU PROMOTING YOUR EVENT?
WHO WILL ATTEND YOUR EVENT?
THIS THE POST EVENT.
HOW MANY PEOPLE ARE EXPECTED TO ATTEND?
HOW WILL YOU RECOGNIZE DONORS?
Pyramid Foods wants to support our local communities. If your request is accepted, please assist us in getting the
word out about Pyramid Foods Giving Programs through member newsletters, flyers and press releases.

NOTE: A COMPLETED APPLICATION IS NOT AN AGREEMENT TO HONOR YOUR REQUEST.

Thank you.

Please return your completed application to the Pyramid Foods Corporate Office or your store's Guest Relations Manager. Incomplete applications will not be considered. You will be notified if your organization is selected.

Please return completed form to:
Pyramid Foods General Offices
Attn: Donations Department
1878 South State Highway 125, Rogersville, MO 65742
Phone: 417.829.9200 • Fax: 417.829.9208