

ORGANIZATION APPLICATION

Kroger 2008-2009 Neighbor to Neighbor Donation Program Organization Application

Organization's Name: _____

Organization's Address: _____

Telephone: (____) _____ Fax: (____) _____

**E-mail Required: _____

Tax Identification Number: _____

Primary Contact Person:

Name: _____

Title: _____

Daytime Phone: (____) _____ E-mail: _____

Please read, initial and follow the instructions below:

1) ___ I have attached a copy of my organization's Letter of Determination from the IRS, which states in writing that my organization is tax-exempt under Section 501(c)(3) of the Internal Revenue Code. Schools need a letter of participation from the principal and churches need a letter of participation from the pastor. *Please note: This is required in order to consider your application.*

2) ___ I have attached the signed Organization Terms and Conditions.

3) ___ My initials and signature below indicate that I understand all proceeds derived from the Kroger 2008-2009 Neighbor to Neighbor Donation Program must be used for a charitable purpose and cannot be used for political or illegal purposes.

Signature

Date

Kroger Neighbor to Neighbor • 19245 David Memorial Drive • Shenandoah, TX 77385
866-995-7643 • email:neighbortoneighbor@kroger.com • www.krogerneighbortoneighbor.com

**Mandatory Field-Email Required