100+WOMEN WHO CARE - MEDINA

Charitable Organization Nominations Fact Sheet

Please be sure to read the 100+ Women of Medina Charitable guidelines document. To submit the form or if you have questions, please email us at 100womenmedina@gmail.com.

	m or m you mave questions, p	rease email as at <u>2000 of the mile of the month</u>
Date:		
1.	Nominating 100+ Women W	ho Care member name, email, and phone:
2. memb	Name and address of charita ers are not eligible to nomina	able organization to be nominated. (Please note that new ite at their first meeting):
3.	Is the organization a 501(c)(3	3) (IRS Certified Tax-Free Status) serving Medina County? Yes
4.	Organization History (year st	carted, mission statement):

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5.	How would the funds be used?
6. receive	What population does the organization serve and approximately how many people will services annually?
7.	Current sources of funding for this organization.
8. meetin	If selected, would someone from the organization be available to speak at our next g to describe the impact of the donated funds?

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9. inform		not to sell, give, or use the 100 women's contact selves or other organizations?
	No	Yes
10.	If this organization is selecte	d by the membership, to whom would checks be payable?
11. the linl		a method to receive online donations? If so, please provide
Please	email the completed form to	100womenmedina@gmail.com.

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