



## 2019 Random Charity Application

**Yes**, I have read and understand the submission guidelines. I further understand that Potawatomi Hotel & Casino reserves all rights and all decisions are final, and they can disqualify an organization for any reason.

### Contact Information

Organization Name:

Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: ( ) - \_\_\_\_\_ Fax: ( ) - \_\_\_\_\_ Website: \_\_\_\_\_

Executive Director: \_\_\_\_\_ Phone: ( ) - \_\_\_\_\_ Email: \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: ( ) - \_\_\_\_\_ Email: \_\_\_\_\_

Day-to-day *Heart of Canal Street* Contact: \_\_\_\_\_ Title: \_\_\_\_\_  
(This person will receive ongoing updates.)

Phone: ( ) - \_\_\_\_\_ Email: \_\_\_\_\_

### Organization Information

#### Demographics

Number of people served in 2018:

Number of children (17 and under) served in 2018:

Primary county served:  Dodge  Jefferson  Kenosha  Ozaukee  Milwaukee  
 Sheboygan  Racine  Walworth  Washington  Waukesha

Number of paid staff in 2018:

Number of volunteers in 2018:

#### Budget

Breakout of 2018 funding sources:	Corporate:	%
(by percentage)	Foundations:	%
	Government:	%
	Individuals:	%
	Federated Campaign (i.e. United Way):	%
	Other:	%

Total operating expenses for 2018: \$ \_\_\_\_\_ Total revenue for 2018: \$ \_\_\_\_\_

Percentage of revenue spent on administrative and fundraising costs: \_\_\_\_\_ %

#### Operations

Number of years organization has been in existence:

In those years, has the organization been named something else? If so, what?

List or attach board members (names and professional affiliation):

Organization Mission Statement:

## Questions

Describe the services/programs provided by the organization:

In general, describe how the organization helps children (used for promotional efforts):

Describe **SPECIFICALLY** how the *Heart of Canal Street* dollars will be used to help improve the lives of children. (i.e. general operations, specific program, etc.)

*Note: Up to 25% of the donation received can be allocated to general operations. The majority must be devoted to a specific children's program.*

How many children will be served through the above use of *Heart of Canal Street* dollars?

Does your agency have specific programs to assist low-income families?  Yes

Yes, we include it in our regular programming  No

If yes, describe how the *Heart of Canal Street* donation will help low-income families:

Please describe VOLUNTEER engagement opportunities for PHC leadership and *Heart of Canal Street* ambassadors – approximately 10 to 40 people.

**Other items to be included with ALL applications (required for submission):**

- |   |  |
|---|--|
| <input type="checkbox"/> Copy of IRS Federal Tax Exemption Letter   | <input type="checkbox"/> Copy of most recent IRS Form 990                |
| <input type="checkbox"/> Completed W-9 Taxpayer Identification Number and Certification form<br>(Must have a current signature) | <input type="checkbox"/> Copy of most recent audit and management letter |
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**Completed Random Charity applications must be postmarked by Friday, June 14, 2019.  
NO EXCEPTIONS.**

Potawatomi Hotel & Casino  
Kira Ward  
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1721 W Canal St  
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**NO HAND-DELIVERED APPLICATIONS ACCEPTED.**