

# Blue Knights® International Law Enforcement Motorcycle Club

## Blue Knights LEMC, Nebraska II Sponsor/Donation Request Worksheet

*(Please submit to an executive board member at least one week prior to meeting to be added to agenda)*

Date of Request: \_\_\_\_\_

Name of requesting member: \_\_\_\_\_

Donation Requested (cash/goods/service): CASH  GOODS  SERVICE

Amount of cash requested? \$ \_\_\_\_\_

In-kind (goods or service) donation, please define:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of organization or person to donate to: \_\_\_\_\_

If organization, function of organization: \_\_\_\_\_

Has Blue Knights, NE II donated previously? YES  NO

If yes, please provide date and amount  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Why do you think Blue Knights should donate to this person/organization?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is the donation to be delivered by member or treasurer?  
\_\_\_\_\_

If delivered by the treasurer, what is the address of the organization?  
**(Please list a point of contact name and phone number)**

Name/Phone) \_\_\_\_\_

(Address) \_\_\_\_\_

Date donation is needed by; \_\_\_\_\_

APPROVED/DISAPPROVED DATE: \_\_\_\_\_