



Members: Use this form as a guide for providing information about the Silicon Valley group you'd like to recommend and represent as a possible funding recipient at a future 100+ Women Who Care Silicon Valley meeting.

Submit completed form at least 10 days prior to our next quarterly meeting for consideration at that meeting. Submit as pdf to marla\_100@yahoo.com or via fax to 408-287-8025 (attn: Marla) For questions, contact Marla Howard Feierabend 408-345-5601.

## NOMINATION of NON-PROFIT ORGANIZATION

<b>ORGANIZATION'S NAME &amp; Contact Person</b>	
<b>ADDRESS (Headquarters and where services are provided, if different) and website address</b>	
<b>MISSION STATEMENT (Any history, details, information on the organization are helpful)</b>	
<b>DATE STARTED</b>	
<b>HOW WOULD THE DONATED FUNDS BE USED?</b> <b>NOTE: We require that the funds be used for the benefit of local services and projects, within Silicon Valley. If the organization serves a wider area, you may identify a specific Silicon Valley project for consideration.</b>	
<b>WHAT ARE THE CURRENT SOURCES OF FUNDING FOR THE ORGANIZATION?</b>	
<b>IS THE ORGANIZATION A 501c3 CERTIFIED CHARITY?</b>	

<b>ADDITIONAL COMMENTS</b>	
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Does the organization agree to not use, give, or sell the contact information of our members for additional solicitation by them or other organizations? \_\_\_\_\_

If funded, does the organization agree to have the member of 100+ Women Who Care Silicon Valley who nominated them report back to the group at the following quarterly meeting with an update on how the funds were used? \_\_\_\_\_

**Submitted by:** \_\_\_\_\_

Nominations accepted from members of 100+Women Who Care Silicon Valley.

**Email:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Date:** \_\_\_\_\_