



# COMMUNITY GIVING REQUEST FORM

Please review our Community Giving Policy prior to completing this form. Requests should be submitted a minimum of 60 days prior to the date needed for review. Keen Compressed Gas Co. will give fair consideration to all requests however often times the amount of requests exceeds our allocated resources. We will notify the requestor of our decision.

## ORGANIZATION INFORMATION

Name of Organization	EIN/Tax ID#
Name of Contact	Title
Contact Phone	Contact Email
Mailing Address	City, State, Zip

## EVENT/DONATION INFORMATION

Event Title	
Event Date	# Attendance Expected
Description of Request	
Signature	Today's Date

Please include a copy of your 501(c)(3) tax exempt letter, and any documentation supporting your request with this form.

Submit to: Keen Compressed Gas Co.  
Attn: Marketing  
PO Box 15146  
Wilmington, DE 19850-5146  
302.594.4560 Fax

## FOR KEEN COMPRESSED GAS CO. ONLY

Donation Value:	Date Sent:
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