

Skokie 5115 Church St. Skokie, IL 60077 Tel. (847) 677-2010 Fax (847) 677-3790

Wheeling 318 N. Milwaukee Ave. Wheeling, IL 60090 Tel. (847) 537-2255 Fax (847) 537-4599

Glenview 1766 Waukegan Rd. Glenview IL 60025 Tel. (847) 657-9020 Fax (847) 657-9099

Contribution Application

All contribution requests must be submitted at least 90 days in advance. House of Rental will review and consider qualified requests and supplementary information and will respond to the requesting organization within 45 days of submission.

| Organization Name | | |
|--|------------------------|-------------------|
| Address | Phone | |
| City | State | Zip |
| Contact Person: | | Phone |
| Service Delivery | Email | |
| Summarize the organization's | mission: | |
| | | |
| | | |
| Identify association with House | se of Rental employe | ee, if any: |
| Financial Information What is the organization's cur | • • | |
| For the organization's current | 1 0 0 | |
| | | ual Contributions |
| 3. Corporate Donations | 4. Govern | nment Grants |
| 5. Foundation-Endowment | Contributions | 6. United Way |
| 7. Other (please describe)_ | | |
| | | ninistration? |
| | | |
| Donation Summary Describe the program for which | ch a donation is curre | ently sought: |
| | | |
| What is the total goal of the fu | andraising activity? | |
| | | |



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| Describe the specific donation requested of H | ouse of Rental: |
|--|--|
| | |
| | |
| | |
| Briefly describe the measurable objectives and | d timetable for the program activities: |
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| | |
| | |
| What target population is to be served? | |
| What target population is to be served. | |
| | |
| Program Assessment Describe how the program's success will be d | lefined: |
| | |
| | |
| | |
| | |
| What is the timetable for evaluating and report | rting the program's results? |
| | |
| | |
| | |
| Please attach to this application: | |
| A. A list of the organization's current B. A copy of the organization's IRS 50 | |
| Return the completed application to: | |
| 1 11 | House of Rental 5115 Church St. Skokie, IL 60077 |
| | Skokie@HouseofRental.com Fax: (847) 677-3790 |