

Karns Foods Donation Request Form

Please read the information on the reverse to be certain that your request falls under our guidelines.

Please PRINT neatly and fill out completely. Incomplete forms will not be considered.

Today's Date: _____ Date Needed: _____

All requests **MUST** be submitted a minimum of **4 WEEKS** in advance of the date needed.

Return the completed form to any Karns Foods location or mail to:

Karns Community Relations, 675 Silver Spring Rd., Mechanicsburg, PA 17050

Are you a non-profit 501(c)(3) charity? Yes No Federal ID #: _____

STOP: If your organization is not a non-profit 501(c)(3) charity, we are unable to give a donation.

Karns Fresh Rewards Card Number: _____

Contact Phone: _____ Contact E-mail: _____

Type of Event: _____

How are you promoting your event? _____

How will Karns Foods be recognized? _____

Organization Information:

Contact Name: _____

Org. Name: _____

Address: _____

City, State, Zip: _____



Community Relations

Karns Store Location

for Pick-up:

___ Carlisle

___ Harrisburg

___ Mechanicsburg

___ Lemoyne

___ Boiling Springs

___ New Bloomfield

___ Hershey

___ Middletown

Type of Donation Requested: (check **ONE** only)

___ **\$25.00 Karns Gift Card**

___ **Coupons for Attendees** (# needed _____)

___ **Advertising** (payment made in the form of a Karns gift card equal to the cost of the ad selected - max \$50)

Ad Size: _____ Height x _____ Width

B&W or Color (Circle One)

Approved

Denied*

*Reason: _____

Buying groceries for your event? We offer a 5% discount off of your purchase for a specific event. See the store manager for details.