

You can email your
Request by going to
leandrahppizzaco@yahoo.com



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Post your upcoming fundraiser

FUNDRAISING APPLICATION

Organization Information

Date: _____

Organization Name: _____

Organization Address: _____

City: _____ State: _____ Zip: _____

Office Phone #: _____ Fax: _____

Purpose of Fundraiser: _____

Organization Federal Tax ID # (required information): _____

How did you find out about Pizza Co Fundraising? _____

Contact information

Name: _____ Affiliation: _____

Address: _____

City: _____ State: _____ Zip: _____

Home/Office # (please circle): _____ Fax: _____

E-mail Address: _____

2nd Organization Contact Name: _____ Affiliation: _____

2nd Contact's Office #: _____

Fundraising Options

Dine In Pizza Certificates collection envelopes Pizza Slices

DATE FOR DINE IN Mon-Fri _____ # of collection envelopes needed _____

I certify that I represent the above-named organization and that the proceeds from the sale of Pizza Co fundraising products purchased by this organization will be used for the purpose as stated above and not for individual gain or profit. Additionally, I understand that Pizza Co fundraising products are non-refundable.

Signature _____ Date _____

For Store Use Only:
Date received: _____
Manager _____ Store _____