



# Fundraising Proposal Form

We appreciate your consideration of Alameda County Community Food Bank as the potential recipient of proceeds from your event, fundraiser, project or program. Kindly fill out this form with as much detail as possible and let us know if you have any questions.

Our logo and trademarks are extremely important to us. Consistent use helps us ensure our outstanding reputation in the community. All written, printed, electronic or online material, before and after the event or promotion, must be submitted to us for approval before distribution. This will help increase name and brand recognition, increasing the appeal of your event.

One way we keep management and fundraising expenses very low is to maintain a small, hard-working professional staff. So although we will certainly do our best to accommodate your requests, we cannot guarantee that an Alameda County Community Food Bank representative will be able to attend your event, meeting or check presentation.

We appreciate your interest in fundraising for Alameda County Community Food Bank, and we look forward to working with you!

## Contact Information:

Mary Canales | Partnerships & Events Manager  
Alameda County Community Food Bank | 7900 Edgewater Drive | Oakland, CA 94621  
☎ 510.635.3663 x 328 | 510.635.3773 | ✉ [mcanales@accfb.org](mailto:mcanales@accfb.org) | 🌐 [accfb.org](http://accfb.org)

# Fundraising Proposal Form

Name of fundraiser: \_\_\_\_\_

Location of event/program: \_\_\_\_\_

Date(s) of event/program: \_\_\_\_\_ Hours of event: \_\_\_\_\_

Type of event/promotion: \_\_\_\_\_

Your name: \_\_\_\_\_ Phone: \_\_\_\_\_

Event/Program Coordinator's Name: \_\_\_\_\_

Group/Organization Name: \_\_\_\_\_

Event/Program Coordinator's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Website: \_\_\_\_\_

Contact Information:

[daytime phone] \_\_\_\_\_ [evening phone] \_\_\_\_\_

[fax] \_\_\_\_\_ [e-mail] \_\_\_\_\_

Has this program been done before? (please check one) Yes No

If yes, when? \_\_\_\_\_

Projected audience (who will attend or support the program): \_\_\_\_\_

Projected Attendance: \_\_\_\_\_

Projected Sales: \_\_\_\_\_

List sponsor(s) (please use additional page if necessary):

1. Name: \_\_\_\_\_

Address: \_\_\_\_\_

2. Name: \_\_\_\_\_

Address: \_\_\_\_\_

3. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name(s) of other supporting organizations (please include in-kind supporters):

Percentage of proceeds to be donated to Alameda County Community Food Bank:

100% Other (please specify amount or percentage): \_\_\_\_\_

Alameda County Community Food Bank must review and approve all materials that include our name and/or logo.

Please check the types of promotional activities you may pursue (check all that apply):

Press Release

Promotional Flyers

PSA (radio)

PSA (TV)

Posters

Canisters

Invitations (print/electronic)

Save-the-Date cards (print/electronic)

Flyers

E-mail

Social Media (facebook, Twitter, etc.)

Website \_\_\_\_\_

Other (describe): \_\_\_\_\_

# Fundraising Proposal Form

## Budget Worksheet

Name of Fundraiser: \_\_\_\_\_

Location of \_\_\_\_\_

Date(s) of \_\_\_\_\_

### Projected Event/Program Costs:

Event \_\_\_\_\_ Venue: \_\_\_\_\_

Rentals: \_\_\_\_\_

Graphic \_\_\_\_\_ Design: \_\_\_\_\_

Postage: \_\_\_\_\_

Printing: \_\_\_\_\_

Supplies: \_\_\_\_\_

Food: \_\_\_\_\_

Entertainment: \_\_\_\_\_

Other (specify): \_\_\_\_\_

### Projected Event/Program Income:

Admission: # \_\_\_\_\_ × \$ \_\_\_\_\_ =

Auction: \_\_\_\_\_

Pledges: \_\_\_\_\_

Sponsorships: \_\_\_\_\_

Underwriting: \_\_\_\_\_

Donations: \_\_\_\_\_

Other \_\_\_\_\_ (specify): \_\_\_\_\_

Other (specify): \_\_\_\_\_

Other (specify): \_\_\_\_\_

TOTAL expenses: \$ \_\_\_\_\_

TOTAL income: \$ \_\_\_\_\_

Estimated Proceeds to be donated to Alameda County Community Food Bank (*income less cost*): \$ \_\_\_\_\_

### Notes:

Expected date of proceeds to be received by Alameda County Community Food Bank (*to be received within 45 days following the event*): \_\_\_\_\_

We ask that all proceeds be submitted by check, cashier's check or money order and made payable to "ACCFB"

*An income and expense accounting is required at the end of every event. Alameda County Community Food Bank reserves the right to review any official accounting or banking records. Event organizer agrees to provide Alameda County Community Food Bank with a complete list of monetary and non-monetary donors including name, address, phone and item or amount donated. We are required to maintain this information with the event's records. Alameda County Community Food Bank may choose to acknowledge donors directly.*

I agree to the above proposal on my organization's behalf:

\_\_\_\_\_  
[name], [organization]

\_\_\_\_\_  
Kathryn Weber, Alameda County Community Food Bank

### Contact Information:

Kathryn Weber | Corporate Partnership & Events Manager

Alameda County Community Food Bank | 7900 Edgewater Drive | Oakland, CA 94621

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