

ACME BUSINESS ASSOCIATION
2017 APPLICATION FOR NON-PROFIT ORGANIZATION

Legal Name of Applicant Organization: _____

DBA (Doing Business As) Name: _____

Street Address: _____

City: _____ State: _____ ZipCode: _____

Mailing Address (if different from above) _____

City: _____ State: _____ ZipCode: _____

Telephone Number: _____

E-Mail Address: _____

Website: _____

Federal Employer ID Number: _____

Organization granted tax exempt status by the IRS?

Yes ___ 501(c) # _____ No ___ Pending ___

Non-profit purpose for which applicant is organized: _____

Non-profit purpose for which contributions will be used: _____

If chosen by ABA members as a non-profit organization to receive funds from the Acme Fall Festival, you would be expected to have as many volunteers as possible to assist in facilitating this event.

List names and addresses of directors, officers, trustees and/or salaried personnel for the current fiscal year. Place a check if this person has responsibility of distributing contributions.

— Name: _____ Title: _____
Address: _____ City: _____ State: _____ Zipcode: _____
Phone Number: _____

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