

# EASTLANDMALL

## NONPROFIT OF THE MONTH APPLICATION

MONTH APPLYING FOR: \_\_\_\_\_

ORGANIZATION NAME: \_\_\_\_\_

WEB-SITE: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

MISSION STATEMENT:

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AREAS OF FOCUS:

(Include relevant information on your organization and how you accomplish your mission statement and make a positive impact on our community.)

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FUNDRAISING EVENT/AWARENESS CAMPAIGN:

(Include name, date, time, location, etc. of the event or details of the awareness campaign and attach graphics if available.)

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A copy of your IRS 501 c (3) determination letter must be attached to be eligible for consideration.

Please e-mail application with determination letter to [Connie.Campbell@Macerich.com](mailto:Connie.Campbell@Macerich.com).

Please contact Connie Campbell at (812) 477-7171 regarding any questions.