



# Community Unit School District 303

**DATE:** \_\_\_\_\_

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

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

**EMAIL ADDRESS:** \_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_

**FAX NUMBER:** \_\_\_\_\_

## CERTIFICATE OF NOT-FOR-PROFIT STATUS

Is this organization a recognized 501(c) 3 not-for-profit group?     **Yes**     **No**  
    • Attach 501(c) 3 Certificate

Will any FOR-PROFIT Business/Group/Organization/Individual benefit from the proceeds of this event or activity?     **Yes**     **No**

Accepted certificates will remain in effect for a period of one year and require renewal each July, or with the first posting request of a new school year.

Changes in an organization's 501(c) 3 status must be reported immediately to District 303.

I hereby certify that the above information is a true and accurate representation of our organization.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

"Empowering and Inspiring ALL"