

NOMINATION FORM

l,	, a member in good standi	ng with 100
Women of Yankton, impact award:	nominate the following organization to be considered for the	e group's next
Organization Name:	:	
Organization Addres	ss/Phone/Website:	
Is the organization a	a registered 501(c)(3) and able to provide tax receipts?	
Who does the organ	nization serve? Does it serve residents of Yankton County?	_
Organization Missio	on Statement:	_
How would the imp	act award be used?	_
	onship to the organization?	_
	act award, would someone from the organization be availab describe the impact of the donated funds?	le to speak at
_	on agree NOT to sell, give, or use our membership's contact nemselves or other organizations?	information

Please submit this nomination form at least two weeks in advance of the meeting to info@100womenofyankton.org. Thank you!