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 **LIGHTHOUSE COMMODITIES, LLC**

**Beacon Fund Donation Request Form**

For donation requests please complete and return this form by email to: jcrist@lighthousecommodities.com

\*\*\*Organization, event or activity must meet Beacon Fund approval guidelines\*\*\*

Or Mail form to: Lighthouse Commodities, LLC

 4719 Shelburne St STE 9

 Bismarck, ND 58503

 701-516-8024

Client Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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|  |  |  |  |  |  |
| Recipient Organization/Event |   |
| Mailing Address |   |
| City, State, Zip Code |   |
| Details of organization/event  |   |
| Requested Matching Funds Amount |   |
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Client Signature Date

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Lighthouse Signature Date