

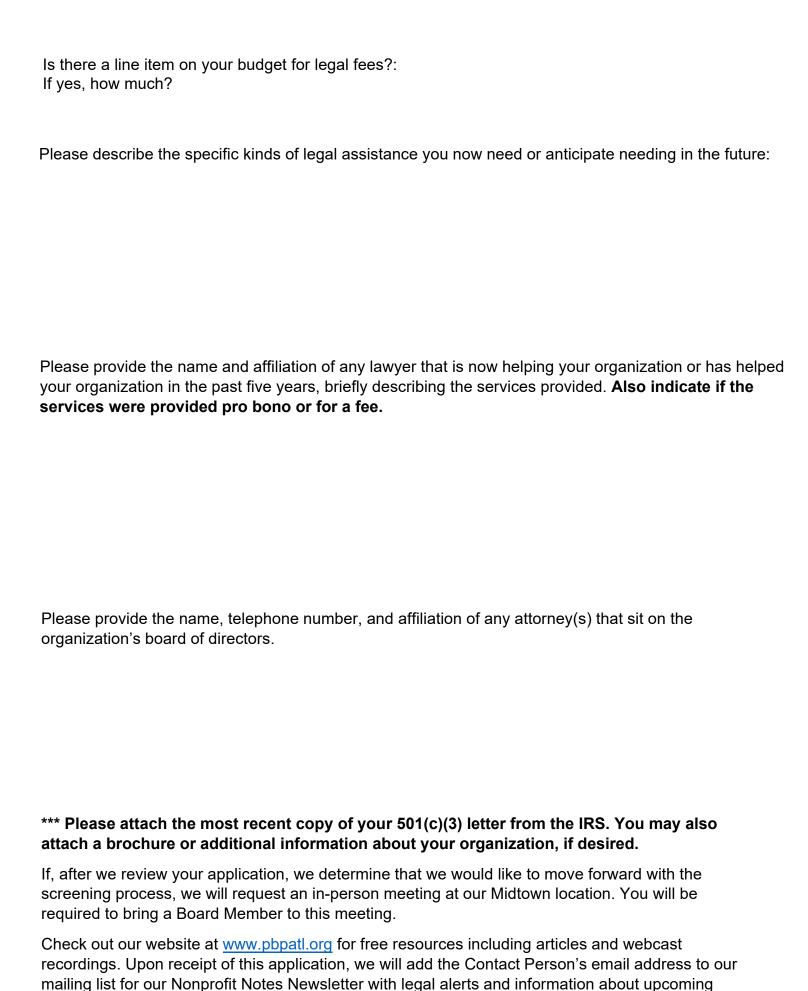
Request for Legal Assistance (Nonprofit Information Form for updating purpose)

This form will help Pro Bono Partnership of Atlanta learn more about your organization and its legal needs. Please download this form and save it to your computer. Once it is completed, please save the copy of the completed form and then email it, along with a copy of your 501(c)(3) letter from the IRS, to RLA@pbpatl.org. You may also attach a brochure or additional information about your organization, if desired.

Given our limited capacity, we cannot accept every applicant as a client. We consider the overall sustainability of the organization in making these decisions. Incomplete requests will not be reviewed.

Legal Name of Organizatio	n:				
Trade Name or DBA if appl	licable:				
Address:					
City:	State:		Zip Code:		
County:	Organization p	hone:			
Name of Contact Person:					
Title:	How long have you held this position?:				
Phone:					
Email:					
Website:					
Provide your organization's Mission Statement:					
For Office Use Only: Date Received:	Date	of Screening Mee	eting:		
AC:	PC:	J	Need LCU:		
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What is your organization's annu	al budget for the curren	t year?:			
What are the total gross receipts/	revenues from the mos	t recent fiscal year?:			
State of Incorporation:		EIN Number:			
Date of Incorporation:		Date of IRS Tax Exemption:			
Please describe how your organize	zation serves low-incom	ne and disadvantaged individuals:			
Please list your organization's se Shelter):	rvice areas (for example	e, Literacy, Childcare, and Housing/			
Where does your nonprofit serve	? Please pick the choice	e that fits best.			
City of Atlanta Metropolitan Atlanta (23 counties) Outside of Atlanta	Statewide National Organization	Outside U.S. If so, name the country:			
About how many people does yo	ur organization currently	/ serve?			
# of volunteers:	# of independent contractors:				
# of staff:					
Please tell us where you heard about the Pro Bono Partnership of Atlanta. :					
# of board members:	Hc	ow often does your board meet?:			
Board Chair Name:					
Board Chair Phone:	Во	ard Chair Email:			
Names of Board Members:					



workshops and webcasts.