



Fuel up. Do good. Community Giving Program

Nonprofit Application

Name: _____ 501 (c) (3) Date Founded: _____ Maui Hawai'i

CONTACT INFO

Contact Name & Title: _____

Contact Phone: _____ Contact Email: _____

Contact Address: _____

DIGITAL

Website: _____

Social Media Presence (check all that apply): Newsletter: Y N

NUMBERS

Annual Budget: _____ Public Funding % _____ Private Funding % _____

Number of Employees: _____

MISSION

Mission: _____

Current Year's Goals: _____

Communities Served: _____

Number of People Served Per Year: _____

How Will This Gift Be Used: _____

Would you be able to hold two carwashes at a Ohana Fuels station during period? Y N



Maui: 385 Hukilike Street, #101 | Kahului, Hawaii 96732 | t: 808.270.2800 | f: 808.270.2801
Hilo: 16 Railroad Avenue, #202 | Hilo, Hawaii 96720 | t: 808.935.6641 | f: 808.934.7197
Kona: 74-5558 B Kaiwi Street | Kailua-Kona, Hawaii 96740 | t: 808.329.1862 | f: 808.326.2755
e-mail: sales@hawaiipetroleum | www.hawaiipetroleum.com | www.ohanafuels.com | www.ministop.com