



# REQUEST FOR DONATIONS

Date: \_\_\_\_\_

Name of Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Reason for Request: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Date Donation Received by: \_\_\_\_\_

Pick up \_\_\_\_\_ or Delivery \_\_\_\_\_

Donation Requested: (Exact, precise description) Cost:

Goods: \_\_\_\_\_ \$ \_\_\_\_\_

Gift Certificate: \_\_\_\_\_ \$ \_\_\_\_\_

Cash: \_\_\_\_\_ \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_

**FOR OFFICE USE ONLY**

Branch: \_\_\_\_\_

Request Received By: \_\_\_\_\_

Request:

Approved: [ ]

Refused: [ ]

Referred to Head Office: [ ]

Recommendations:

Signed: \_\_\_\_\_

Head Office

Date: \_\_\_\_\_

Approved: [ ]

Refused: [ ]

Signed: \_\_\_\_\_