

DONATION REQUEST FORM

Request made by:

Name _____

Address _____

Phone () _____ **Alternate Phone** () _____

Type of items to be collected

Who will collect the items?

Where will items be collected? Stored?

Who will inventory the items?

Who will be responsible for forwarding the collected?
items to its destination? (Name, address, phone)

How will the items be forwarded to its destination?

What is the expected cost to send items to its destination (packing, postage,
insurance)? \$ _____

How will this cost be paid?

Will money be accepted as a donation? _____ If yes, who will be responsible for its collection and safekeeping?

How will the money be used?

Who will be responsible for placing the information in the church bulletin? (Name, Address, Phone)

Who is the contact person for the receipt of the donated items?

Name _____

Address _____

Phone (_____) _____ **e-mail** _____