



Store # \_\_\_\_\_

**Donation Request form**

Thank you for visiting Polk Oil. Please complete the General Information section below. In order to allow sufficient time to review each request, all requests should be submitted at least **forty-five (45) days prior** to the date the donation is required. Return this completed form to the corporate office with all supporting documents attached.

**General Information**

Date of Request: \_\_\_\_\_

Organization Requesting Donation: \_\_\_\_\_

Organization Tax ID Number: \_\_\_\_\_

Organization Complete Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Person Requesting Donation: \_\_\_\_\_ Title: \_\_\_\_\_

Person's Drivers License No: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Person's Home Address: \_\_\_\_\_

Nature of Event: \_\_\_\_\_

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

Type of Donation Requested: \_\_\_\_\_ Check \_\_\_\_\_ Gift Card

Amount Requested: \$ \_\_\_\_\_

If Merchandise donation is requested, specify exact description and quantities requested (the total amount will be placed on a gift card to be used within the store): \_\_\_\_\_

Store Director's Comments: \_\_\_\_\_

Store Director's Signature: \_\_\_\_\_

**For Office Use Only**

Committee Comments: \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Date: \_\_\_\_\_