



DONATION REQUEST FORM

(please limit your request to one location within our organization. thank you.)

Today's Date: _____

What Organization do you Represent? _____

Is this a Nonprofit Organization? _____

Tax Exemption Number: _____

Are you seeking a donation from (please circle) COLDWATER CAFE or BODEGA?

Please explain what you are seeking (gift card, food items, etc.). _____

What will donated items be used for? _____

If monetary donation is approved, to whom should a check be made payable?

If donation is approved, by what date is it needed? (please allow at least 2 weeks)

Name, Address, Phone, Email of person receiving donation: _____

For Internal Use:

Approved / Denied Date: _____ Donation: _____