



# DONATION REQUEST FORM

Thank you for your time and patience. Our Marketing Manager will get back to you on your request as soon as possible.

Organization/Event: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Contact Address: \_\_\_\_\_

Contact phone number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Date of the event: \_\_\_\_\_ Numbers expected: \_\_\_\_\_

Donation requested (please circle):      Cash/monetary      Savings Bond      Prizes/Giveaways  
Other \_\_\_\_\_

Please list appropriate reason(s) for donation (please attach a flyer if available):

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## **HSB Staff to complete**

Employee initiating the donation:

Location (please circle appropriate):      Willmar      Cosmos      Litchfield      Hutchinson

Is the organization/individual a customer?      Yes      No

## **Marketing to complete**

Donation approved:      Yes      No

If no, state reason: