Donation Request- Scott's Flowers & Gifts

1353 NW 53rd St., Lawton, OK 73505   Phone 580-357-ROSE (7673)
7831 Hwy 277, Elgin, OK 73538   Phone 580-492-4880

www.ScottsFlowers.com   Fax 580-357-8030

    Each year our company allocates a budget to support community activities through contributions. We will always try to do our part to make your organizations programs. However, requests have become so numerous that they exceed our financial capabilities. Therefore, we must put some structure to our donations to fairly distribute to as many organizations as possible. The purpose of this form is to aid us in determining if we will be able to make a contribution at the time requested. We thank you for your cooperation and taking the time to fill this request out completely. If a donation is granted, this authorizes Scott's Flowers & Gifts to use the organizations name as a donation recipient in any of Scott's Flowers advertising.

**Please return this completed form 30 days prior to your event to enable us to process it.

Name of
Organization _____

Email address _____

Address_____

Name of
President _____

Organization
Phone # _____ Fax # _____

Name of
Person Making
This Request _____ Phone # _____

Email Address _____

What is the purpose of your organization?
_____
Is this a for-profit or non-profit organization?   ☐ for-profit ☐ non-profit
Will a current copy of your mailing list be available to us? ☐ yes   ☐ no
Have you received previous donations from us?   ☐ yes   ☐ no When? _____
Is this organization a customer of our company?   ☐ yes   ☐ no   Acct # _____

If the organization is not a customer, what prompted you to request a donation from this company?
_____
_____

Are you (person making the request) a customer of our company?
☐ yes   ☐ no Acct # _____

Are any florists members of your group or organization?   ☐ yes   ☐ no
If so, who?
_____

Are other florists being contacted with this or a similar request also?
_____

What type of a donation are you looking for? Please be specific.
_____
_____
_____

How will you be using it?
_____

Will it be raffled, auctioned or sold after the function?   ☐ yes   ☐ no
How and when will Scott's Flowers be mentioned and recognized?
_____
_____

Who is authorized to   Their
Pick up this donation? _____ Phone #_____

Date of event _____Time needed to be picked up _____

Who will be attending? _____

How many will attend? _____

Please do not write below this line ----- for office use only.   Value $ _____
Invoice # _____

Item(s) donated _____
Date _____
Donation is ☐ Approved ☐Declined   ☐ Further info needed by Date _____

Officers signature _____