

DONATION REQUEST FORM

Name of Organization:		
Contact Person:		
		ber:
Email:	Tax I.D. 1	Number:
Check here if you don't want to be a		
Date of Event:	Name of	Event:
How will the donation be use 1. Auction 2. Door prize 3. Raffle 4. Other: (Explain)		
I understand that the Long upon their discretion. In t strictly for charitable I am aware of the Ducks	he event the Long Island Due purposes through auctions spolicy to grant one (1) don	ights to refuse any donation request ucks donate an item, it will be used s, door prizes, and raffles, etc.
Signature	Title	Date

**ALL REQUESTS PROCESSED 1 MONTH IN ADVANCE OF EVENT DATE!!! **

