



# Vinckier Foods Donation Request Form

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## About You

Your name: \_\_\_\_\_  
First Last

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

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## About Your Organization

Name of organization: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or PO Box City State Zip Code

Is your organization a 501(c)3?    Yes    No

If your organization is a 501(c)3 please attach a copy of the tax-exempt certificate to your form submission email.

Your organization's mission: \_\_\_\_\_

Has your organization received a donation from Vinckier Foods in the past?    Yes    No

Your relationship to the organization: \_\_\_\_\_

Executive Director: \_\_\_\_\_

Board President (if different): \_\_\_\_\_

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## About the Donation

Name and Type of event the donation will be used: \_\_\_\_\_

Event Goal: \_\_\_\_\_

How will the donation be used? \_\_\_\_\_

Exact donation seeking: \_\_\_\_\_

If requesting refreshments, how many people do you wish to serve with the Vinckier Foods contribution? \_\_\_\_\_

How is recognition given to donors (at the event, prior, during, etc.): \_\_\_\_\_

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## Receiving Donation

Date needed: \_\_\_\_\_ Time needed: \_\_\_\_\_

Pick Up Location:        Almont        Armada        Wadhams-Kimball        Yale

Person picking up donation: \_\_\_\_\_

Person picking up donation work/home phone numbers: \_\_\_\_\_  
Work Home

*If approved, Vinckier Foods will provide your organization with specific information on where and when the donated product will be available for pick-up.*