



## Donation Request Form

Contact Name:	Request Date:
Organization:	
Address:	
<u>City/State/Zip:</u>	
Phone:	Fax:
Email:	
Does your organization have 501(c)(3) statu	ıs? 🗌 Yes 🔲 No
Please describe the organization/event for which you are seeking support:	
What type of donation are you requesting (in-kind, monetary, gift item, plant material, etc.)?	
Have we supported your event/organizatio	n in the past? If so, when and how?
Please submit completed form to:	

Please submit completed form to:

Donation Request

Culver's Garden Center & Greenhouse · 1682 Dubuque Road · Marion, IA · 52302 Fax: (319) 377-4820 · Phone: (319) 377-4195 · www.culverslandscape.com