



**REQUEST FOR DONATION FORM**

**Today's Date:** \_\_\_/\_\_\_/\_\_\_

**Contact Name:** \_\_\_\_\_

**Organization Name:** \_\_\_\_\_

**Organization's 501(c) Number:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone No.:** (    ) \_\_\_ - \_\_\_ **Alt. Phone No.:** (    ) \_\_\_ - \_\_\_

**Contact Email:** \_\_\_\_\_

**Donation Being Requested:** \_\_\_\_\_

\_\_\_\_\_

**Donation Request Date:** \_\_\_/\_\_\_/\_\_\_

**Name of Cause/Benefactor:** \_\_\_\_\_

**Why do you feel we should donate to your cause?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Request forms must be completed and returned, by mail, to B&R Septic no less than **60** days prior to the Donation Request Date. B&R Septic reserves the right to approve or deny any requests for donation at their discretion.