

Donation Request Form

Thank you for considering us for your event! To help us expedite your donation request, please complete this form in its entirety. In addition, a descriptive letter written on official letterhead of the organization must accompany this form. Please note we receive hundreds of donation requests and unfortunately cannot donate to all.

Mail Completed Form To: Email Completed Form To: Looking Glass Gifts & Gallery info@lookingglassgiftsandgallery.com

RE: Donation Request 2140 Front Street Cuyahoga Falls, OH 44221

Name of your organization:		
Summarize the focus of your organization (i.e. shelter, school, healthcare)		
Mailing address:		
Contact person:		
Phone number:		
Non-profit ID #:		
What is the date of your event?		
What type of event will you be hosting?		
What kind of attendance do you anticip	oate for your event?	
What type of advertising are you planni	ng to promote this event?	
What type of donation are you requesti	ng? (Gift Card / Item/ Service)	
Additional Comments:		
Signature:	Date:	

FOR INTERNAL USE ONLY:	
Donation given:	Value:
Date given:	
Processed by:	