

# Spedale's Florist, Inc.

1012 Petroleum Parkway  
Broussard, LA 70518  
Phone 337-233-4404 Fax 337-233-4402 email: sales@spedales.com  
www.spedales.com

## Donation Request Form

Group, Institution or Company seeking Donation: \_\_\_\_\_

Type of Entity: Non-profit \_\_\_ For-profit \_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of Event for Donation: \_\_\_\_\_

Event Description:

\_\_\_\_\_  
\_\_\_\_\_

Type of Donation Requested:

\_\_\_\_\_

Preferred Pick Up Date: \_\_\_\_\_

Does your organization have an account with Spedale's? \_\_\_\_\_

\_\_\_\_\_  
Signature of Person Seeking Donation

\_\_\_\_\_  
Date

Terms of Donations:

***(All requests must be submitted 30 days prior to the event)!***

Requests must have correspondence on Institution, Organization, Group, or Company letterhead attached to this completed form with a full description of the event. All requests will be reviewed by a committee every thirty days for consideration. You will only be contacted if your request was approved. No phone calls please. We only consider donations for organized groups, no individual donations are considered. Please email form to: sales@spedales.com

For Office Use Only:

Approved By: \_\_\_\_\_ Donation Request #: \_\_\_\_\_

Item Donated: \_\_\_\_\_ Invoice #: \_\_\_\_\_ Date: \_\_\_\_\_