



DONATION / SPONSORSHIP REQUEST

Requester's Name:	Today's Date:
Organization Name:	
501 c3 number or FEIN#:	
Address:	
City: ALBUQUERQUE	State: Zip:
Please give a brief description for the purpose of your request: (Please note we do not give cash donations)	
Date Needed:	
Contact Phone:	E-mail:
Signature:	Date:
Please contact our office at 505-242-3211 with any questions, or email vicki@garciaskitchen.com	
OFFICE INFORMATION:	
Retail Value of Donation	
Itemized Detail of Donation:	Location to Pick up Garcia Gift card:
#205 Marketing #207 Donation	
Vicki's Authorization:	Date: 8-8-24
Date Submitted to Accounting:	Date Contacted Recipient:
Signature for donation pickup:	Date of donation pickup: