

# Nassau Health Foods

## DONATION REQUEST FORM

In order for a donation request to be considered, this form must be either submitted in a hard copy to a manager at Nassau Health Foods, or submitted electronically.

### ORGANIZATION INFORMATION

Today's Date: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Federal Tax ID: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Mission Statement:

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

### CONTACT INFORMATION

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

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

### DONATION/SPONSORSHIP

Specific requests- e.g. gift certificate for raffle/auction; type/donation in kind

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

Event Name: \_\_\_\_\_

Desired date of donation: \_\_\_\_\_

Your preferred pickup time (8am – 7pm): \_\_\_\_\_

### Notes

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

In order to support all the organizations in our community that need our help, we need to limit donations to organizations based within Fernandina Beach & Yulee.

**THANK YOU!**

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[www.nassauhealthfoods.net](http://www.nassauhealthfoods.net)