

# THE LINDBERG PUMPKIN PATCH DONATION REQUEST FORM

ORGANIZATION NAME:

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NAME OF EVENT:

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DATE OF EVENT:

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WHOM WILL THE EVENT BE BENEFITTING:

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EXPECTED NUMBER OF ATTENDEES:

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WHAT YOU ARE REQUESTING:

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DATE YOU NEED IT BY:

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CONTACT PERSON'S NAME:

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CONTACT PERSON'S EMAIL:

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ORGANIZATION WEBSITE:

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N/A if not applicable

CHARITY EIN NUMBER:

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N/A if not applicable

# THE LINDBERG PUMPKIN PATCH DONATION REQUEST FORM

**\*ATTACH EVENT FLYER TO THIS FORM OR THIS INFORMATION ON AN OFFICIAL LETTERHEAD\***

All donation request will be reviewed through our office please allow at least two weeks before your event. Please no phone calls, emails or drop ins.

Mail form and flyer or letterhead to:

The Lindberg Pumpkin Patch  
3178 IL Route 173  
Caledonia, IL 61011