



GLASS SLIPPER

--- Donation Request Form ---

Business Name: _____

Address: _____

Contact Person: _____

Phone: _____ Email: _____

Donation Item(s): _____

Item Description For Auction: _____

Value: _____ Restrictions: _____

Donation Enclosed: Yes____ / No____ Request Pick Up: Yes____ / No____

Pick Up Instructions: _____

Please complete this form and return to
Heidi Overman at hoverman@championsforlearning.org
or by phone 239.643.4755 or Fax 239.643.4799

Thank You For Your Donation!