



Westchester County

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Recipient Organization Request Form

INSTRUCTIONS: Please Type or Print clearly. Forms that are not legible will NOT be processed. Complete one form per organization/program. Enter your Federal Tax ID (EIN) in the space provided.

Type: WCDSS: ☐ Church: ☐ 501(c)3: ☐ Other: ☐ Specify:

Name of Organization:

Address:

Federal Tax ID(EIN):

City:

State:

Zip Code:

Program Name:

Point of Contact Name:

Office Phone:

Cell Phone:

Email Address:

Alternate Contact Name:

Office Phone:

Cell Phone:

Email Address:

(Auto Calculated)

Total Number of Children:

We are requesting toys for the following age groups (please include the quantity for each category):

	0-2	3-5	6-8	9-11	12-14	15-18
Boy						
Girl						

ACKNOWLEDGEMENT: By submitting this form you acknowledge that the coordinators decision is final. As a charity we can only fulfill requests as public donations are received and that we may not be able to accommodate all requests, even if the request was approved. While we will attempt to fulfill request prior to our campaign end date, the majority of our donations are collected at the end of the campaign, please keep this fact in mind when planning your activities.

FOR TOYS FOR TOTS USE ONLY

Approved: ☐ Denied: ☐

Distribution Date	Toys	Books	Stuffers	Distributed By	Recorded/By
					<input type="checkbox"/>
					<input type="checkbox"/>

Revision: 2019.09.28.1 All previous versions are obsolete and will not be accepted.

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