



QUEBRADA BAKING CO. DONATION REQUEST FORM

Contact:

Contact Name _____ Date _____

Email _____ Phone _____

About Your Organization:

Organization Name _____

Website _____

Employer Identification Number _____

Please describe the cause that your organization supports _____

About Your Event:

Date _____ Number of Attendees _____

Brief Description of Event _____

% of proceeds that will go to the organization _____

How will this event benefit our community? _____

Quebrada takes great pride in supporting local non-profit organizations. We believe in the importance of providing charitable gifts to diverse initiatives that we know can make a meaningful difference in our neighborhoods of Arlington, Belmont and Wellesley.

We ask that all requests be submitted via this form for review.

We will review each request within two weeks, and contact you if we are able to provide a donation.