

PORTLAND TOY & JOY MAKERS, INC.
5916 NE Going Street, Portland, OR 97218
Office 503-823-0922 Fax 503-823-0924
Federal tax ID # 93-6096777

TOY REQUEST FORM

DATE: _____ ORGANIZATION: _____

ORGANIZATON'S Tax I.D. #: _____ (requirement 501(c)3 tax ID)

CONTACT NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____ REQUESTED PICK UP DATE: _____

LOCATION OF EVENT: _____

DATE/TIME OF EVENT: _____

FILLING OUT THIS REQUEST DOES NOT GUARANTEE SERVICE FOR THIS YEAR. YOU WILL BE CONTACTED IF YOUR REQUEST CAN BE FILLED

The number and selection of toys may be limited due to reduced donations and increasing Individual family requests.

REQUEST:

AGE GROUP	1 to 2	3 to 5	6 to 8	9 to 10	11 to 13
Number of girls	_____	_____	_____	_____	_____
Number of boys	_____	_____	_____	_____	_____

All Requests must be submitted to Toy & Joy Maker's office by December 15th. Groups will be given a pick up time and date and will be responsible for picking up their packages on that scheduled pickup date and time. As we have limited space packages not picked up on scheduled date and time, will be returned to our stock.