

## Office Use Only

House Account in Good Standing:  yes  no

Total Purchases YTD: \_\_\_\_\_

Purchases Last Year: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

APPROVED?  yes  no

*Please complete this form and return to Lowe's Floral and Garden Center in person at 1640 4th Ave NE, by US Mail at PO Box 216, Minot, ND 58702-0216 or via Fax at 701/838-5225. Please return this form at least ten (10) business days before the date of your event.*

Requested By: \_\_\_\_\_ Date: \_\_\_\_\_

Requestor's Phone: \_\_\_\_\_

Requestors Email: \_\_\_\_\_

Title of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_ Event Date: \_\_\_\_\_

Description of Event: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How will the event be publicized? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Will sponsor's be recognized by name in the publicity? \_\_\_\_\_

Will the sponsor's receive a link to the group's website? \_\_\_\_\_

**Office Use Only**  
**Item Donated:**

Gift Certificate   Plant Material   Fresh Flowers   Other

VALUE: \_\_\_\_\_

