



Request Form

Your contact info: (Agency will be contacted to arrange pick-up when request is ready.)

Name: _____ Date of Request: _____

Agency: _____

E-mail: _____

Phone: _____

Office Use Only:

Order # _____

Family Size: _____ **Consisting of: (please fill in the appropriate numbers)**

Adults: Female _____ Male _____

Children: Age 2 and under _____ Age 3-10 _____ Age 11+ _____

Please circle the products most needed by your client.

Shampoo/Conditioner for Adults	Toothbrushes/Toothpaste
Shampoo/Conditioner for Children	Lip Balm
Baby Wipes	Dental Floss/Mouthwash
Brushes/Combs	Washcloths
Soap	Shaving Cream
Deodorant	Disposable Razors
Lotion – Hand and Body	Feminine Hygiene Products Please circle item needed: Pads Tampons
Band-Aids/Q-tips	Kleenex

Email completed form to: workplacevolunteercouncilmc@gmail.com

For questions, call United Way at 715-298-5723

The Workplace Volunteer Council is an unincorporated Community Partner Project of the United Way of Marathon County. We appreciate the administrative assistance and additional in-kind services they provide to our organization. The WVC's signature projects are Fill A Backpack Fill A Need, Back to Basics, and Bare Necessities.

