



FURNITURE NEED REFERRAL

Please complete this form to present furniture requests to FPWC. Distribution is based what items are available. FPWC will call you when your request can be filled. You must be able to pick-up your items!

Requesting Agency: _____

Caseworker: _____ Phone: _____

Reason for need: _____

FAMILY NAME _____

ADDRESS _____

PHONE _____

ADULT _____ # CHILDREN _____

Date of Request: _____

1. _____

2. _____

3. _____

4. _____

5. _____

SEND TO THE FPWC FAX NUMBER (513) 934-5261 or EMAIL AT

LINDA@IHNWC.ORG

**** Important!! Please take note that certain high need items such as beds, washers and dryers may not be available. ****