

Email: info@ellislakefoundation.co.uk Website: www.ellislakefoundation.co.uk

Registered Charity Number: 1204388

Thank you for your interest in re-ordering hygiene packs from **Ellis Lake Foundation**. Please complete the form below to request additional packs for your hospital.

Hospital Name:	
Department/Unit:	
Contact Person:	
Phone Number:	
Email Address:	
Delivery Address:	
	T
Number of Hygiene Packs Requested:	Male:
To the second of	Famala
To allow us to supply multiple hospitals	Female:
we would request you don't over order.	Unisex:
	Offisex.
	Teenage Sanitary:
	Toomage community.
Preferred Delivery Date:	
Special Requests (e.g., additional	
items, specific needs, etc.):	
<u>Authorization</u>	
By submitting this order form, I confirm that	. , , , , , , , , , , , , , , , , , , ,
support individuals in need and that I am au	thorized to place this request on behalf of
the hospital.	

Authorized By (Name)

Signature (if applicable)



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Submission Instructions

Please send the completed form to:

• **Email:** info@ellislakefoundation.co.uk

You will receive a confirmation email once your order has been processed.

Thank you for partnering with us to make a difference!

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Feedback Please use the space below to share any feedback, suggestions, or requests on how we	
can better support you.	