

**EXTERNAL EMERGENCY RELIEF REQUEST
CLOTHING/SHOE REQUEST**

300 East Lea Boulevard
Wilmington, DE 19802

Phone: (302) 761-4640 - Fax: (302) 762-3318

Please print clearly:

Date: _____ State ID # _____
(if applicable)

☐ Male
☐ Female

First Name _____ Middle Initial _____ Last Name _____

Date of Birth: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____ County: _____

Phone Number: _____ e-mail: _____

Number of family members living in household: Adults _____ Children _____

Number and ages of Children: Boys _____ Girls _____

Case Manager: _____ Organization: _____

Signature _____
Phone Number: _____

Address: _____

Reason for Emergency Request:

☐ Loss of Job ☐ Health ☐ Fire/Flood ☐ Other (Explain)

Store Location _____

Signature _____

Return forms to:

Lori Magno
Goodwill of DE & DE County, Inc.
300 E. Lea Blvd.
Wilmington, DE 19802

Phone: (302) 504-1736
Fax: (302) 762-3318
E-mail: lmagno@goodwillde.org

Do not fill out below line:

Date Distributed: _____

Amount \$ _____ Voucher _____ G/L Cost Centers _____

Authorized by: _____

Reason for emergency clothing request:

Please use this page to give detailed information.

*The mission of Goodwill of Delaware & Delaware County, Inc. is to
improve the quality of life for people with barriers to self-sufficiency
through the Power of Work.*