

QUILTS FROM THE HEART

A Public Benefit Nonprofit Corporation
6423 192nd Pl SW, Lynnwood, WA 98036

Email: info@quiltsfromtheheart.org

Website: www.quiltsfromtheheart.org



Quilt Recipient's Questionnaire

Complete and return this questionnaire to the address above.

Please use the back of this page if you need additional space.

Organization Name: _____

Address: _____

Contact person: _____ Phone number: _____

- 1) What service do you provide? Who do you provide services to? (You may include your official brochure if that answers this question.)

- 2) If you provide residential services, please complete the following questions.
 - a) How many beds do you have and what sizes are the beds? (e.g. 6 twins, 4 bunks, 12 bassinets/cribs,)

 - b) Would the quilts remain with your beds or do you plan to give them to clients when they leave your organization? If you would be giving them away, what is your estimate of the annual turnover?

- 3) If you do not provide residential services, please describe how you would use or distribute our quilts.

- 4) Would you be able to use non-bed size quilts, such as lap or throw sizes? If so, where would they be used?

- 5) In order to customize our quilts to serve your needs, please tell us about the gender and ages of your clients.

- 6) Does any other organization provide you with quilts, if so, who?

Quilts From The Heart Liaison: _____