



# TRF GLOBAL CONTRIBUTION FORM

## INDIVIDUAL COMPLETING THIS FORM

Name \_\_\_\_\_  
 Daytime Telephone (\_\_\_\_) \_\_\_\_\_ Date \_\_\_\_\_  
 E-mail \_\_\_\_\_

## I. CONTRIBUTION DETAILS

*Do not send cash. Please disregard options that do not apply in your country.*

Amount of New Contribution \_\_\_\_\_  
 Type: *(please check one)*  
 Check enclosed (payable to The Rotary Foundation)  
 Visa  MasterCard  American Express  
 Discover  Diners Club  
 Credit Card # \_\_\_\_\_  
 Expiration Date \_\_\_\_\_ CVN \_\_\_\_\_  
 Currency \_\_\_\_\_  
 Wire transfer  
 Name as it appears on credit card \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_  
 Designation: *(please check one)\**  
 Annual Programs Fund (eligible for SHARE)  
 Permanent Fund World Fund (Benefactor recognition only)  
 Permanent Fund SHARE (Benefactor recognition only)  
 Humanitarian Grant # \_\_\_\_\_ NUMBER IS MANDATORY  
 World Fund

*Note: Changes to gift designation can only be requested within 90 days of gift receipt date within current Rotary year.*

## II. DONOR OF CONTRIBUTION (receives donor credit and gift receipt)

Person  Club  District  Business/Foundation  Zone  
 Name (Mr., Mrs., Ms., Dr.) \_\_\_\_\_  
 ID # \_\_\_\_\_  
IF UNKNOWN, LEAVE BLANK  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State/Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_  
 Check here if this is a new address.  
 Daytime Telephone (\_\_\_\_) \_\_\_\_\_  
 Rotary Club of Donor \_\_\_\_\_  
 Club Number \_\_\_\_\_ District \_\_\_\_\_

## III. RECIPIENT OF PAUL HARRIS FELLOW RECOGNITION CREDIT

Memorial PHF  Certificate of Appreciation (Business only)  
 Name (Mr., Mrs., Ms., Dr.) \_\_\_\_\_  
CIRCLE FAMILY NAME OF PERSON  
 ID # \_\_\_\_\_  
IF UNKNOWN, LEAVE BLANK  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State/Prov. \_\_\_\_\_  
 Country \_\_\_\_\_ Postal Code \_\_\_\_\_  
 Rotary Club of Recipient \_\_\_\_\_  
IF NOT A ROTARIAN, LEAVE BLANK  
 Club Number \_\_\_\_\_ District \_\_\_\_\_

## IV. SHIPPING ADDRESS

Processing time for recognition is four to six weeks from receipt of application.  
 Please do not send recognition.

Presentation date \_\_\_\_\_  
 Rush requests may incur shipping charges.  
 Please send recognition items to:  Club president  Other, fill in information below  
 Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State/Prov. \_\_\_\_\_  
 Country \_\_\_\_\_ Postal Code \_\_\_\_\_  
 Telephone (\_\_\_\_) \_\_\_\_\_

## V. RECOGNITION POINTS TRANSFER

If this contribution is being "matched" or supplemented with Foundation Recognition Points from a club, district, or individual, please complete the appropriate spaces below.

Foundation Recognition Points from:  
 Club Amount \_\_\_\_\_ District Amount \_\_\_\_\_  
 Individual Amount \_\_\_\_\_ ID # \_\_\_\_\_  
 Authorized Signature \_\_\_\_\_

If there are multiple transfers of recognition, please complete a *Recognition Transfer Request* (102-EN).

Please retain a copy for your records.