

Individual completing this form

marviadar comprecing the form		(=)
Name	1	
Daytime Telephone	Date	- /
1 RECIPIENT OF RECOGNITION		
Name	Membership ID #	
Address		
Rotary Club of	Club # District	#
2 TRANSFER OF FOUNDATION RECOGNITION)N	
IMPORTANT: Complete this section if a club, district, or Recognition Points or Paul Harris Fellow credit. Amount to be transferred:		Foundation
A. □ Individual Name	Signature of individual, required if individual is donating his/her Paul Harris Fellow credit (sign here)	
TRF ID # B. Club #	Signature of club president, required (sign here)	
C. District #	Signature of district governor, required	l (sign here)
3 RECOGNITION REQUESTED □ Paul Harris Fellow (certificate, pin, and medallion)	Multiple PHF Pin Levels (US\$): \$2,000 to \$2,999.99 one sapphire \$3,000 to \$3,999.99 two sapphires \$4,000 to \$4,999.99 three sapphires	
☐ Multiple Paul Harris Fellow (pin only)	\$5,000 to \$5,999.99 four sapphires \$6,000 to \$6,999.99 five sapphires	
☐ Not eligible at this time	\$7,000 to \$7,999.99 one ruby \$8,000 to \$8,999.99 two rubies	
Please send recognition materials to:	\$9,000 to \$9,999.99 three rubies	
Name		
Address		
Daytime Telephone	Date Needed	

Daytime Telephone

If check is enclosed, please mail contribution and form to our banking address:

Please send the completed form to:

Donor Services The Rotary Foundation One Rotary Center 1560 Sherman Avenue Evanston, IL 60201-3698 **OR** fax to 847 328 4101

In the USA: The Rotary Foundation P.O. Box 75133 Chicago, IL 60675-5133 In Canada: The Rotary Foundation P.O. Box 9988 Postal Station A Toronto, ON M5W 2J2