



# 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

Check # \_\_\_\_\_ Credit Card # \_\_\_\_\_

Currency \_\_\_\_\_ Expiration Date \_\_\_\_\_

- Wire transfer      Name as it appears on credit card \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

Designation: *(please check one)\**

- Annual Programs Fund (eligible for *SHARE*)       PolioPlus  
 Humanitarian Grant # \_\_\_\_\_ NUMBER IS MANDATORY

- Permanent Fund World Fund (Benefactor recognition only)       World Fund

- Permanent Fund *SHARE* (Benefactor recognition only)

*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.) \_\_\_\_\_  
CIRCLE FAMILY NAME OF PERSON

ID # \_\_\_\_\_  
IF UNKNOWN, LEAVE BLANK

Address \_\_\_\_\_

City \_\_\_\_\_ State/Prov. \_\_\_\_\_

Country \_\_\_\_\_ 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.