



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 AMEX Discover JCB
Credit Card # _____

Check # _____ Expiration Date _____

Currency _____ Name as it appears on credit card _____

Wire transfer
Date _____

Designation: *(please check one)**

Annual Programs Fund (eligible for *SHARE*) PolioPlus

Permanent Fund World Fund (Benefactor recognition only) PolioPlus Partners Project # _____
NUMBER IS OPTIONAL Country _____

Permanent Fund *SHARE* (Benefactor recognition only) Humanitarian Grant # _____
NUMBER IS MANDATORY

World Fund

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

II. DONOR OF CONTRIBUTION

Person Club District Business/Foundation Other

Donor (Mr., Mrs., Ms., Dr.) _____
CIRCLE FAMILY NAME OF PERSON

Donor's 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 RECOGNITION

Recipient is: *(please check one)*

Same as Donor Other *(give details below)* Memorial *(give details below)*

If Other or Memorial, please complete the following:

Person Business/Foundation

Recipient (Mr., Mrs., Ms., Dr.) _____
CIRCLE FAMILY NAME OF PERSON

Recipient's 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. RECOGNITION ITEMS MAILING

Processing time for recognition is four to six weeks from receipt of application.

Please do not send recognition.

Check here if recognition is a surprise. Presentation date _____
(If this is a rush request, you may be required to pay shipping charges.)

Please send recognition items to:

Name _____

Address _____

City _____ State/Prov. _____

Country _____ Postal Code _____

Telephone (_____) _____

V. RECOGNITION POINTS TRANSFER

If this contribution is being "matched" or augmented with Foundation Recognition Points from the donor's account, please complete the appropriate spaces below.

Foundation Recognition Points From:

Club Amount _____ District Amount _____

Individual Amount _____ ID # _____

Authorized Signature _____

If the transfer request is not from the donor listed in Section II or there are multiple transfers of recognition, please complete a Recognition Transfer Request (102-EN) or attach a list of details.

Please send a copy to your district Rotary Foundation committee chair and retain a copy for your records.