



Rich-Mar Rotary Club

Donation Request Form

Date: ____/____/____

Organization name: _____

Organization website address: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact name: _____

Contact title: _____

Contact email: _____

Contact phone: _____

Amount of donation request: \$ _____

Description of services provided and community served:

Name and description of event or activity:

(Send completed request form to: Rich-Mar Rotary, P.O. Box 392, Mars, PA 16046)