



LIONS CLUB

New Providence, New Jersey

INDIVIDUAL DONATION REQUEST FORM

Note: This Form is to be used by **individuals** requesting a donation from the New Providence Lions Club (“NP Lions”). The top portion of the Form should be completed and submitted to the **Chairperson** of the NP Lions Giving Committee (GC). When appropriate, only the Chairperson will be aware of the identity of the person(s) for whom the request is made. Confidentiality will be strictly maintained. The request will be reviewed by the GC prior to being submitted to the NP Lions Board and membership for approval. The GC may contact the submitter for additional information.

Submitter Information: **Confidential Request: Yes / No (Circle One)**

Name of Person Submitting (Please Print): _____ Date: __/__/____

Address: _____

Phone: (C) _____ (H) _____ (W) _____ E-Mail: _____

Donation Request:

Dollar Amount: _____ Date Required (by): _____

Check Payable to: _____

Donation For/Reason: _____

Have Prior Donations Been Made by the NP Lions (Y/N): _____ If Yes:

When were they made: _____ What was/were the Dollar Amount(s): _____

Portion below to be completed by the NP Lions Giving Committee

Donation Request Review

Date Committee Met to Consider Request: __/__/____ Urgency of Request: _____

Attendees: _____

Committee Recommendation (App/Dis/Amt, Comments): _____

____ % of Projected Budget