

REQUEST FORM - Lions Good Samaritan Award

Recipient Name (as to be placed on Award): \_\_\_\_\_

Please state the reason for the Award in 20 words or less:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Requesting Club: \_\_\_\_\_

Contact Person's Information: Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Presentation Date: \_\_\_\_\_

Please allow three weeks for delivery.

Our Club has previously donated \$500 or more to the Foundation

√ Make \$500 check payable to: Lions District 14A Charitable Foundation

Mail this form and check (if applicable) to:

*PDG Don Richardson, Treasurer:*

*82 N. Allentown Road, Telford, PA 18969*