



Vietnam Veterans of America, Inc.  
 Plymouth-Canton Chapter #528  
 P.O. Box 6319 • Plymouth, MI 48170



**DONATION REQUEST**

1) Name of Organization or Persons this gift is to benefit, please include name and address and relationship to beneficiary if "in name of someone".  
 (Please note, that being related to, or friend of, a member of this Chapter does not affect the decision of the Board Of Directors, or the General Membership of Chapter #528.)

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

2) Please give a Dollar amount /and or, other needs with this request.  
 \$ \_\_\_\_\_ Or \_\_\_\_\_

(Dollar amount , services, clothing or labor needs )

**Does request exceed limits**

3) What Objectives, Goals, and Solutions will this donation be used for?

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

4) Do you foresee future requests for this same Beneficiary?

YES \_\_\_\_\_ NO \_\_\_\_\_ POSSIBLE \_\_\_\_\_.

5) Will there be Receipts for Chapter Treasury? YES \_\_\_\_\_ NO \_\_\_\_\_

6) May Chapter #528 Plymouth/Canton Verify with the Beneficiary of this Donation? Yes/No \_\_\_\_\_ or is this to be an Anonymous gift? Yes/No \_\_\_\_\_

\*\*\*\*\*  
Name of Requesting Member: \_\_\_\_\_

2nd by: \_\_\_\_\_ Date Applied \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\*\*\* This form Must be filled out PRIOR to All Requests For Donations From Chapter #528 P/CVVA. PLEASE NOTE: ALL REQUESTS ARE SUBJECT TO EXECUTIVE BOARD REVIEW AND VOTE, A GENERAL MEMBERSHIP REVIEW AND VOTE, OR BOTH.

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 (secretaries use only)  
 REQUEST: PASSED \_\_\_\_\_ DENIED \_\_\_\_\_ DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Check# \_\_\_\_\_ Check made out to: \_\_\_\_\_ Treasurer Int. \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_