## Rotary District 6960 Wheelchair Donation Form



I would like to contribute to the Wheelchair people in need, victims of war, illness, accid sponsor wheelchairs (one wheelchair person in need costs \$100.00).	ents and natural	disasters. I wou	ıld like
Please accept my donation in the amount of \$_	•		137
Name			
Address			
City State Zip	Phone		
Please note my gift in honor of:			
Please note my gift in memory of:			

Make check payable to: The Wheelchair Foundation

Mail to: Steve Agius 22168 Isola Verdi Way Estero, FL 33928

Thank you for your Donation