****

Atlanta Plastics Charity Golf Tournament

**Charity Request Form**

**Name of Person Requesting:**

**Name of Person Requesting for:**

**Date of Request:**

**Detail of Need:**

**Send completed forms to:** [**charityrequest@cartierwilson.com**](mailto:charityrequest@cartierwilson.com)

|  |
| --- |
| **For Committee Use Only:**  **Accept: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Decline: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **If Accepted:**  **Amount Given: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Check number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Date Given: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Officer Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |