ASHRAE RP: Gift Summary Form

Chapter:_____ Date:_____

Submitted By:_____ Phone: (____)_____-_____

Event: _____

Contributor/Member Name	ID Number*	Amt. Received	Additional Comments

Total/Page Subtotal: **$**_____

* If you are unable to find an ID Number, please include FULL address, including phone number

DO NOT SEND CASH

Please mail this form, along with all checks to:
ASHRAE RP
180 Technology Parkway
Peachtree Corners, GA 30092