

The Robertson Association

P.O. Box 10 Calhoun, Tn. 37309
TRA & OTR's Bricks & Stones, Donation Recognition Program.

Address (line	e 1):			
Address (line	e 2/optional):			
City:		Phone: () _		
State:	ZIP:	Phone: () _		
E-mail:				
I designate my donation to support the following TRA or OTR Project/Fund (If no selection made, proceeds will go into the General Fund)				
To acknowle	dge vour donation	we will place a Brick or Sands	stone in your honor in or around the	
	• .	•	ick or Sandstone. Alphanumeric text onl	v:
		•	ther information related to text.	,,
•		'		
[LINE 1]				
[LINE 2]				
[LINE 3]				
[LINE 4]				
[LINE 5]				
[LINE 6]				
[LINE 7]				
[LINE 8]				
	_			
Donor Signa	ture:		Date:	_
TRA Represe	entative Will Com	olete Items Below:		
	Tha	nk you for your contribution o	f\$	
Method of D	onation: Cash Am	ount \$		
Check Amou	int \$	Check Number	Check Date	
•				

Please keep this written acknowledgment of your donation for your tax records. It is your responsibility to ensure your compliance with tax records requirements. No goods or services have been rendered to you in return for your contribution.

TRA is a 501-c-3 non-profit organization. We gladly accept tax-deductible donations to help support organization projects and continuity.