

# George F. Hixson Diamond Form

DIA #: \_\_\_\_\_

HIX #: \_\_\_\_\_

Award Type:  
IDD \_\_\_\_\_ ENDOW \_\_\_\_\_

**SURPRISE: (CIRCLE ONE)**  
YES NO

LEVEL #: \_\_\_\_\_

Order Date: \_\_\_\_\_

Presentation Date: \_\_\_\_\_

Recipient Name: \_\_\_\_\_ Member ID#: \_\_\_\_\_

Recipient Address: \_\_\_\_\_

Recipient's Club Name: \_\_\_\_\_ Key #: \_\_\_\_\_

Donor Name: \_\_\_\_\_

Donor Address: \_\_\_\_\_

Club President: \_\_\_\_\_

Ship to: \_\_\_\_\_

### Donor Information (For Office Use Only)

Member ID#: \_\_\_\_\_

District #: \_\_\_\_\_

Division #: \_\_\_\_\_

Key #: \_\_\_\_\_

Club Name: \_\_\_\_\_

Phone No: \_\_\_\_\_

(required)

### Credit Card Information

Am. Express \_\_\_\_\_ MasterCard \_\_\_\_\_ Visa \_\_\_\_\_ Amount to Charge: \$ \_\_\_\_\_

Cardholder Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

\*\*\*\*\* (BELOW FOR OFFICE USE ONLY) \*\*\*\*\*

Date	Check Number	Check Amount	Award Amount

Return form to: **Kiwanis International Foundation, 3636 Woodview Trace, Indianapolis, IN 46268**  
Telephone: 317-875-8755 or 800-549-2647, exts. 266 or 237, FAX: 317-879-0204