



**Shinta Mani**  
foundation

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

Nationality: \_\_\_\_\_

Email: \_\_\_\_\_

City: \_\_\_\_\_

*\*\*Please Print Legibly - we want to confirm receipt of donation and send pictures of your support being received.*

## Details of Donations

	QTY	Cost	Total
<b>Hospitality Training School</b>			
Student Meals - 1 week		\$12	
Student Rice Contribution - 1 month		\$25	
Student Tuition - 1 year		\$950	
<b>Community Support</b>			
Mosquito Net		\$8	
Bicycle		\$45	
Water Well**		\$175	
<b>Micro-Finance Loan</b>			
Micro-Finance Loan (1)		\$500	
Micro-Finance Loan (2)		\$1,000	
Open Donation- Micro-Loan Program			
<b>Health Care</b>			
Support a Dental Clinic (app. 700 children)		\$400	
<b>Other</b>			
Open Donation			
<b>Total Donation Given</b>			

Any Special Requests?:

\_\_\_\_\_

\_\_\_\_\_

\*\*Water Well Banner should Read:

\_\_\_\_\_

\_\_\_\_\_

Signature

\*\*Shinta Mani Foundation is only able to accept: Cash, Credit Card (Visa & Master Card), and Bank Transfer (please ask for details)

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**For Office Use Only**

Well Number: # \_\_\_\_\_ Well Location: \_\_\_\_\_

Response Email written: \_\_\_\_\_ (Date) \_\_\_\_\_ (By)

Completion Email written: \_\_\_\_\_ (Date) \_\_\_\_\_ (By)