Requests for Individuals

To assist Technology Assisting People In Need with processing your request, please write clearly and legibly. When you have finished this form, please sign, date, and return this form to:

Technology Assisting People In Need
P.O. Box 12916
Cincinnati, Ohio 45242

Last Name:_____ First Name:_____

Gender (circle one): Male Female Phone # (include area code):_____

Your Street Address:_____

City:_____ County:_____ State:_____

Zip + 4:_____ E-Mail Address:_____

How did you find TAPIN?_____

_____

Number of Computers you are Requesting:_____

Any Other Equipment you are Requesting:_____

Please, if you would, give a brief explanation of the reason for this request:_____

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

Signature:_____ Date:_____