Charitable Donation Request

Rotary
Rotary Club of Florence
District 5110

Name of your Agency/Organization: _____

Mailing Address: _____

Contact Name: _____

Contact Email: _____

Contact Daytime Phone: _____

Service Objective and Focus Areas. The Rotary Club of Florence is a non-profit, service organization whose objective is to encourage and foster the ideal of service as a basis of worthy enterprise. Our club also supports Rotary International's *seven areas of focus*: supporting education; growing local economies; protecting the environment; promoting peace; fighting disease; providing clean water, sanitation and hygiene; and saving mothers and children.

Step-By-Step Process. For consideration of your request, please complete this form and return it with other supporting documents to the Rotary Club of Florence, P.O. Box 294, Florence OR 97439 or email to Laurel Ferguson at laurelsrotary@gmail.com. On Page 2, you can indicate whether Rotarians might be able to support your project as volunteers. Volunteer requests are subject to the interest and availability of our members. We will consider all requests at our monthly Board of Directors meetings and notify applicants of our decisions as soon as possible thereafter.

Organizational Information

What is your organization's mission? _____

_____

How many years has your organization been in operation? _____

Is your organization incorporated as a non-profit in Oregon? Yes _____ No _____

If your organization has tax-exempt status, please provide your tax ID number: _____

Are donations to your organization considered tax deductible by the IRS? Yes ____ No _ ___

Project/Program Information;

For what project or program are you requesting funds?

_____

_____

_

Please describe the project/program goals, objectives, activities and expected results. _____

_____

_____

How many individuals/groups/communities will benefit from this project/program? _____

What is the timeline for completion of the project/program? _____

Please explain how this project/program will help further one or more of the seven areas of focus listed on page one. _____

The Rotary Club of Florence takes great pride in raising funds for our community partners. If we make a charitable donation to your organization, please share how and where you will acknowledge this donation. _____

Financial & Request Information

Please provide a basic budget that reflects how much will be required, if anything, to cover the costs of: personnel, equipment, supplies, local travel/transportation, and other costs.

What is the total cost of this project/program? _____

Of this amount, how much is being requested from the Rotary Club of Florence? _____

How much is being requested from other donor(s)? _____

Of this latter amount, how much has been secured to date? _____

Do you need additional volunteers for your project or event? _____

If yes, how might Rotary volunteers be able to assist?_____

Finally, please attach any promotional information you may have. - Thank you!

Date the board reviewed request: _____

Outcome: _____

Check # _____ ***Check Amount*** $ _____

Date Distributed _____ ***By Whom***: _____

Authorized Signature _____ ***Title*** _____

***Contact Information*:** Rotary Club of Florence ~ P.O. Box 294 ~ Florence, OR 97439