

Must be received by JGMF no later than February 29, 2016

Julius Gius Memorial Rotary Foundation

P O Box 2100

Ventura, CA 93002-2100

CHARITABLE GIVING FUNDING REQUEST FORM

Name of Sponsoring Rotarian: _____

Project Name _____

Funds Payable To _____

Address _____

City/State/Zip: _____ Contact Phone Number: _____

Is the Payee a 501(c)(3) organization? Yes (Agency Tax I.D.# _____) No

Requested Amount _____ Total Project Cost _____

Describe project/purpose of funds (*attach supporting documents if needed*): _____

List other sources of funds that will be used to support this project: _____

State how Rotary will be acknowledged or publicized if your request is granted: _____

Project Chair _____ Date _____

(To be completed by JGMF)

Date Received by JGMF: _____ Approved \$ _____ Rejected

Modification/Comments _____

Authorized Signature _____ Date _____

(President or Secretary)

Funds Sent On _____ Via _____