



# Rotary Club of Lake Stevens and Granite Falls

P.O. Box 908 Lake Stevens, WA 98258

## DONATION/SUPPORT REQUEST FORM

\*Additional information may be required

1. Date: \_\_\_\_\_
2. Name of organization or individual: \_\_\_\_\_
3. Contact information (phone #'s, email, address): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. Tell us about yourself or your organization: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Indicate the dollar amount requested: \_\_\_\_\_ Date funds are needed: \_\_\_\_\_
6. For what purpose will the funds be used? Include project goals and timeline for completion. Attach additional sheet as necessary: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. How will this activity benefit the community? How many people in the community will benefit from this request? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Explain the impact/ramification of not being funded. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. What do you know about **ROTARY**? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. If funded, I agree to provide information to confirm that the expenditure of funds was used for the specific purpose stated within 30 days of project completion or one year from receipt of funds.  
Signature of requestor: \_\_\_\_\_  
Print name: \_\_\_\_\_

---

### BOARD OF DIRECTORS APPROVAL SECTION

---

The Board of Directors has: APPROVED \_\_\_\_\_ DISAPPROVED \_\_\_\_\_ the Request. Date: \_\_\_\_\_  
If Approved: Amount: \_\_\_\_\_ Signature: \_\_\_\_\_  
Conditions, if any: \_\_\_\_\_  
\_\_\_\_\_