



Brantford Rotary Sunrise

Donation Request

Date:

Charity Name:

Contact Name:

Address:

Home Phone:

State/Province:

Cell Phone:

Zip/Postal Code:

E-mail Address:

Amount Requested:

Registered Charity # :

Reason/Benefit for the Requested Donation?:

Will Rotary be recognized? If so, please provide details.

Continue on the next page

Is there someone willing to do a presentation to our club? yes no

Rotary contacts or referrals:

What else do we need to know? *Please provide any pertinent information that you feel will help us in our decision to help support this cause*

Thank you for your donation request. Our Donation Committee meets three times a year to review donation requests. We will notify all at this time of our decisions. In the meantime, we applaud you in your endeavours to make this world a better place.

Kind regards,

*Brantford Rotary Sunrise
Donation Committee*



Brantford Rotary Sunrise Donation Committee Members

Chair

Donation Request Review - INTERNAL USE ONLY

Date of Review:

Reviewer's Name:

Is there any known conflicts? If so explain:

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Is there any Rotary involvement?: How?

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Donation Request Rating

- very high
- high
- neutral
- low
- very low

Additional notes and course of action to be taken:

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Date of result notification:

Date cheque was given :