



GRANT REQUEST

Date: _____ Organization name: _____

Contact name: _____ Phone #: _____

Email address: _____

Mailing address: _____

Organization tax ID#: _____ Grant request amount: \$ _____

Provide a brief description of your organization: _____

Describe how the grant money will be spent. List the materials, equipment and/or services requested:

Do you have another funding source? _____ If yes, who? _____

Please submit additional documentation to provide information about your program or project. You will be notified of the decision on the funding request by phone or email. We appreciate stories and comments on the outcomes of your program or project.

Please mail or email the grant request to at: EPRF, PO Box 14664, Portland, OR 97293
or eprcfoundation@gmail.com

EPRC USE ONLY: _____

Rotarian Contact: _____ Amount Approved: _____

Board Approved Date: _____ Date Remitted: _____