



# Shakopee Rotary Club Donation Request Form

Date \_\_\_/\_\_\_/\_\_\_

Organization \_\_\_\_\_

Amount Requested \_\_\_\_\_ Funds needed by \_\_\_/\_\_\_/\_\_\_

Contact Person \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Telephone \_\_\_\_\_

Does your organization raise funds from Gambling Operations ? YES NO

Describe how the funds will be used:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are there other community partners recognized in this project ? YES NO

If Yes, please list \_\_\_\_\_

How will Shakopee Rotary be recognized in the project ?

\_\_\_\_\_  
\_\_\_\_\_

Rotarian Recommending (if applicable) \_\_\_\_\_

Return form with IRS 501(c)(3) Determination Letter to:

The Rotary Club of Shakopee

or email to mileslahr@me.com

Attn: Miles Lahr

enter *Donation Request* in

PO Box 135

the subject Line

Shakopee, MN 55379

-----*For Club Use Only*-----

Date Received \_\_\_/\_\_\_/\_\_\_ Date First Reviewed \_\_\_/\_\_\_/\_\_\_ Approved Y N

More Information Needed Y N Explain \_\_\_\_\_

Date Determination made \_\_\_/\_\_\_/\_\_\_ Y N

Explain \_\_\_\_\_

Date Organization Notified \_\_\_/\_\_\_/\_\_\_ Date Funds Disbursed \_\_\_/\_\_\_/\_\_\_