

**Cupertino Rotary**  
**AOS PROJECT PROPOSAL FORM**

Funds Requested: \$ \_\_\_\_\_ (AOS) Committee

Beneficiary/Payee: \_\_\_\_\_ If 501 (c)(3) Tax ID #: \_\_\_\_\_

Contact: \_\_\_\_\_ Title \_\_\_\_\_

Tel: \_\_\_\_\_ Email \_\_\_\_\_

Address: \_\_\_\_\_

Rotarian Champion(s)/Project Manager recommending proposal: \_\_\_\_\_

**Proposed Project or Program Description—location, specific need & charitable purpose being addressed:**

**Who are the recipients, how many are there, how will they benefit:**

**How will the project be carried out; e.g. length of time, number of Rotarians who will participate:**

Submitted By:	Date approved by AOS:
Signature:	Dollar Amount Approved by AOS
Date submitted:	Signature Chair AOS
	Name of Project (AOS Chair to Complete)