# **JACKSON HOLE ROTARY SUPPER CLUB**

**CHARITABLE ASSOCIATION**

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Date \_

Amount Requested $ Date Needed:

ORGANIZATION OR INDIVIDUAL MAKING THIS REQUEST:

Is this a tax exempt organization? If yes, please provide tax id# \_

Address:

Contact Person(s) Phone numbers

Email

**DESCRIPTION OF USE FOR REQUESTED FUNDS:**

Please be specific and include all the information to process this request. Continue on the back of this form if more space is needed to complete this request.

Have you applied to other organizations for this specific financial need? \_\_\_\_\_\_\_\_\_\_

Have you received funding and how much? Please explain: \_

Please return this to your Rotary contact person or mail to: Rotary Supper Club, Box 7656, Jackson WY 83002

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Request received by: \_ Date: Charitable Board Member

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**Amount to be sent, if accepted:**

Comments of Trustees: Check Number:

Date