

Rotary Club of Los Gatos



Philanthropy Application Form
Due: February 28

DATE: _____

NAME OF CHAMPION: _____

NAME OF PAYEE: _____

TAX I.D. NUMBER: _____

Is this a 501 (c) (3) Organization Yes No

LOCATION: LOCAL OR INTERNATIONAL? _____

REQUESTED AMOUNT _____

PAYEE CONTACT PERSON: _____

PAYEE CONTACT TELEPHONE: _____

PAYEE CONTACT EMAIL: _____

PAYEE MAILING ADDRESS: _____

MEMO LINE ON CHECK, IF REQUIRED: _____

IS THIS A CONTINUING RELATIONSHIP? IF SO, FOR HOW MANY YEARS?

HAS THERE BEEN MEASUREMENT AND REPORTING OF RESULTS BY PAYEE? _____

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WHY ARE FUNDS NEEDED AND WHO WILL BENEFIT? _____

WILL ROTARIANS BE ACTIVELY INVOLVED WITH THIS PROJECT?
YES NO

IF SO, HOW MANY ROTARIANS/HOURS ARE EXPECTED (estimate): --

WHY ARE YOU, THE CHAMPION, SUPPORTING THIS ORGANIZATION?

IS THE RECIPIENT AWARE THAT A FINAL REPORT OF PROGRESS IS REQUIRED? YES NO

NOTE: Resolution 6 States: ...each payee is requested to submit a letter by the end of the calendar year describing how the funds were spent and the philanthropic benefits derived therefrom.

For processing the application by the President and Treasurer

COMMITTEE ASSIGNMENT: _____

APPLICATION REFERENCE NUMBER: _____

APPROVED AMOUNT: _____