

Apple Valley Rotary Foundation – Request for Funds

Project or Recipient Name				
Address		Contact Person:		
City/State/Zip		Contact Phone:		
Website		Contact Email:		
□ Local □ Nation		onal	□ International	
Dollar Amount Requested		Requested Date for Check		
□ One Time Request □ Annual Request		Date Request Submitted:		
Name of Rotarian Sponsor	Email Address		Phone	
Will other Rotary Clubs be participating? ☐ Yes ☐ No If yes, provide other club information				
Club Name:	Club Contact:		Contact Email/Phone:	
Description of Project/Gift Who will this funding help? Attach Pictures, History, Future Plans, Power Point, Etc.				
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For what will the funds be used?	Provide addition	onal information, as needed, to better understand how these
Food	funds will be u	sed.
Clothing		
Toys		
Transportation		
Gifts		
Education/Classes/Training		
Building Materials/Tools		
Event Sponsorship		
Organization Supplies		
General Operating Fund		
Other (please describe in space		
provided)		
Signature of Sponsor		 Date
If Approved - Provide the Organization Name &	mailing address	for the Foundation Board to Mail the Check.
Organization Name		
Mailing Address		
City	State	Zip
oundation Notes		
□ Request Denied		
□ Request Approved		
Amount Approved \$	Check #	Check Date