



# Rotary Club of Reno Central Charitable Foundation Gift Request

Organization Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone/Email: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

A recognized IRS 501(c)(3)? YES / NO IRS Number: \_\_\_\_\_ Last Year 990 filed: \_\_\_\_\_

Total Cost of Project: \$ \_\_\_\_\_ Amount Requested: \$ \_\_\_\_\_ Other Funding: \$ \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ When will \$ be disbursed? \_\_\_\_\_

Sponsor (Club/Service Committee/Club Member): \_\_\_\_\_

Have you received funds from Reno Central Rotary in the past? When \_\_\_\_\_ Amt \$ \_\_\_\_\_

Relationships among Organization, Sponsor and Beneficiaries?

Description of the Project or Purpose for which the funds are being requested.

Your Organization's objectives? Charitable/ Educational/ Scientific purposes?

How will you recognize Reno Central Rotary's gift if one is granted?

Submitted by: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

*Please submit this form with your request and attach any supporting documentation. Organization agrees to provide RCRC Charitable Foundation a report, within 90 days of receipt of funds, outlining how funds were expended and that they were used in accordance with this approved donation request.*

===== *For Club use only* =====

Sponsor Review: \_\_\_\_\_ RCR President and Board Review: \_\_\_\_\_

Approved: \_\_\_\_\_ \$ \_\_\_\_\_ Declined: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_

===== *For Foundation use only* =====

Stewardship Review: \_\_\_\_\_ Recommend (Y/N) \_\_\_\_\_ ; Board Review: \_\_\_\_\_

Approved: \_\_\_\_\_ \$ \_\_\_\_\_ Declined: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_