



Submitted to Treasurer for payment: \_\_\_\_\_  
Copy sent to Coordinator: \_\_\_\_\_  
Copy sent to Assigned Board Member: \_\_\_\_\_

**PROPOSAL**  
(Check One)

**Project** ☒

(Hands-On with or without Check)

**Grant** ☐

(Check Only)

Name of Project/Grant: Altrusa Loves our ER Nurses

Recipient/Name of Organization (Beneficiary): Scott & White ER Nurses

Payee for check, if different than recipient: \_\_\_\_\_

Project/Grant Description: There are a total of 100 ER nurses (2 shifts) working at Scott & White.

During the past year and a half their work lives have been very demanding and stressful

as they have cared for Covid and other patients throughout the year.

Altrusa of Temple would like to recognize them and show appreciation to each of them by providing

a bag of goodies at the end of their shift.

Dollars Requested: \$250 Estimated Man Hours Required: 20

Proposed Project Date/Grant Presentation Date: March 3, 2022 Deadlines, if any: \_\_\_\_\_

Has Altrusa, Inc. of Temple participated in this project and/or provided dollars previously?

If Yes, When: no Funding \$: \_\_\_\_\_

Proposed Project/Grant Coordinator: Susan Cory

Co-Coordinator: Cindi Black

Submitted By: Susan Cory Date: 2-5-22

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Board Recommendation:

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

Approved: \_\_\_\_\_

Assigned Board Member: \_\_\_\_\_

Presented to Club

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

Approved: \_\_\_\_\_

Declined: \_\_\_\_\_

If approved by Club: Committee Members should be turned in to Board Member Designated above

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Total Hours of members participating \_\_\_\_\_

Total number of Members participating \_\_\_\_\_

Have all receipts been turned in to Treasurer \_\_\_\_\_

**SUBMIT**