Funding Request Form

Today's Date:	Or	Organization Name:	
Is the Organization a Non-Profit:	YES	NO	Amount Requested:
Contact Person:			
Phone Number:			Email:
Organization Mailing Address:			
Would you be willing to come to a	Glouce	ster Rotary	meeting to speak about the work of your
organization and how you plan to	use req	uested funds	? YES NO
Who are the beneficiaries of the fu	nds? A	pproximatel	y how many people will benefit?

Please return the completed form to:

The Gloucester Rotary Club Attn. Service Project Funding Request P.O. Box 811, Gloucester, VA 23061

OR

to Henry Moncure at <u>HWM1974a@outlook.com</u>