

Stockton Sunrise Rotary Club Application for Contributions

Please complete this application to help us properly consider your funding request. This form must be completed in full and postmarked no later than April 25 of the application year.. You may attach additional information, but it must accompany this completed form. The completed form and two copies should be mailed to:

Stockton Sunrise Rotary Club, Attn: Club President, PO Box 7501, Stockton, CA 95267

Organization name	Date
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Name & title of person requesting funds	Phone
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Address (city, state & zip)

President	Phone	Years of service
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Vice President	Phone	Years of service
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Secretary	Phone	Years of service
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Treasurer	Phone	Years of service
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Please also attach the following:

- Names of Board of Directors,
- Most recent financial statement
- Most recent year-end financial statement.

Years in existence	FY Operating budget	% Administration
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1. Clearly describe purpose, services and major activities of your organization.

2. Other sources of funding:

3. Number of:
Paid fulltime staff _____ Part-time staff _____
Volunteers _____ Members _____

4. Name of paid chief executive: _____

Years of service: _____

5. List any Stockton Sunrise Rotary Club Members actively involved in your organization.

6. Amount of funds requested: \$ _____

7. How will funds be spent and what result will be achieved? (Be specific.)
8. Have you received funds from Stockton Sunrise Rotary Club in the past 10 years? If yes, please give years, amounts received, purpose and how used. Attach additional information as needed.
9. Are contributions to your organization declared exempt for income tax purposes by the U.S. Dept. of Treasury, Internal Revenue Service? Yes No
Tax ID: _____
10. If you are this year's Grants recipient, how will Stockton Sunrise Rotary be recognized?

Submitted by:

Name Title

Telephone Number Email Address