



Funding Request

Northside Fayetteville Rotary

Return completed form to PO Box 3661, Fayetteville, AR 72702

(479) 521-3438

Select one: IRS designated 501c3 organization OR: 501c4 501c19 organization (eligible for Civic and Veterans Grant ONLY)

OR: Faith Based Organization Public School Federal, State or Local Government Agency

Organization Name: _____ Tax ID (EIN) #: (9 digits) _____

Address: _____ City: _____ ST: _____ Zip: _____

Contact Name: _____ Contact Phone: _____ - _____ - _____

What service does your organization provide to the community?

Amount Requested \$ _____ Will these grant funds directly benefit your local community? Yes No

Specifically, how will the requested funds be used?

What percentage of the organization's funds go toward Administrative Expenses? _____ %

How did you hear about Northside Rotary's grants? _____

Organization Representative: By signing below I acknowledge that this form represents a request for funding and is not a guarantee of funding. I understand that final approval is subject to the Northside Fayetteville Rotary board of directors' approval. I also understand that the organization may be asked to send a representative to Northside for a short presentation and agree to make every effort to attend.

Signed: _____ Printed: _____ Date: _____