



1000 Hills Rotary Club
PO Box 887
Kirksville, MO 63501

Donation Request Application

Group/Organization Applying:

Website:

Address:

City:

State:

Zip Code:

Contact Person:

Title:

Contact Email:

Contact Phone:

Club Sponsor:

Project Title:

Projected Start Date:

Projected End Date:

Geographic Area Served by Project:

Number of People Served by Project:

Donation Request Amount:

Total Projected Cost:

Project Summary Description (Attach Separate Page if Necessary) After completion Mail to Address Listed at Top of Application:

Applicant Signature

Date

Club Sponsor Signature

Date



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