



The Rotary Club of Cumberland Allocation Request Form

PLEASE TYPE OR PRINT ALL INFORMATION

Applicant Information: _____ **Date:** _____

Organization Name: _____

Organization Mailing Address: _____

City: _____ **State:** _____ **Zip Code** _____

Phone Number: _____ **Fax Number:** _____

Does your Organization have IRS Tax-Exempt Status? (Proof is required to be considered) _____

Name of Authorized Representative: _____

Representative's Title: _____

Representative's Phone Number: _____

Representative's E-Mail Address: _____

Name of Rotarian Contact (if any): _____

Has your Organization received funding from Rotary in the past? _____

If so, when, and for what amount(s)? _____

Please attach a copy of your organizations' most recent financial report and proof of Tax Exempt status to this application.

Description of Request:

What is the basic mission/purpose of your organization? _____

Amount of Funding Request from the Rotary Club of Cumberland: \$ _____

If awarded, how will these funds be used? _____

All Applications must be postmarked no later than **April 30th, 2019.** Please mail all applications to:

**The Rotary Club of Cumberland
Attn: Jeff O’Neal, Chair Allocations
Review Committee
12500 Willowbrook
Road, Cumberland, MD
21502**

I certify that the information provided in this application is accurate and correct.

Signature of Authorized Organization Representative

Date