

**SOUTH FORSYTH ROTARY CLUB**

**Cumming, Georgia 30040**

**BUDGET ALLOCATION REQUEST**

Organization name: \_\_\_\_\_

Address: \_\_\_\_\_

Organization contact person: \_\_\_\_\_ Telephone: \_\_\_\_\_

Rotary member sponsor(s): \_\_\_\_\_

For calendar 20\_\_ or fiscal year from \_\_\_\_\_ to \_\_\_\_\_

How will the requested funds be used by your organization?

- a) \_\_\_ Unrestricted funding for general program support – (Amount) \$ \_\_\_\_\_
- b) \_\_\_ Funding for a specific program, service or position – (Amount) \$ \_\_\_\_\_

Program, service, position	Amount
_____	_____
_____	_____
_____	_____
_____	_____

- c) Please describe in detail how the funds requested from the South Forsyth Rotary Club will be used:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Total amount for above stated year is \$ \_\_\_\_\_.

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**BUDGET ALLOCATION REQUEST – CONTINUED**

1. What is the organization's purpose?

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2. What is the geographic area covered by your organization?

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3. Target population (age, sex, special needs, interests, and other particulars):

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4. Please describe the structure of your organization, names of Members of Board of Directors and Executive Committee and number of volunteers:

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5. What main fundraising activities does your organization conduct?

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This application is submitted for your review as our official application for funding.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Telephone: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Telephone: \_\_\_\_\_