2017-2018 ROTARY DISTRICT 5930
HURRICANE HARVEY RELIEF

Rotary District 5930 - Hurricane Harvey Relief Fund
Project Request and Acceptance Form

Date of Request________________________

Rotary Club Name:____

Project Responsible Contact:____

Address:____

City, State, Zip:____

Phone Numbers: Cell:________________________ Other:_________________________

E-mail Address:____

Club Name to receive Funds:____

Request Amount: $_________ ____________________

Project Title:____

Project Scope: (attach sheet if needed)

_____________________________________ __________ ________________________________

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Individuals served:______________________ Amount of request: $ ____________________

Date funds needed:___________________________ Date of Completion: $____________________

Disbursement description:____

Approval for Project – Signatures

Club President Print Name and Sign:__________ __________ ____________________________

And (one) Club Officer Print Name and Sign: ____

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Below to be approved by Rotary District 5930 Hurricane Harvey Relief Fund Approval Committee

Amount approved: $_____ __________ ___________ Date:_____ _____________ _______

Project number:_____________________

Modifications to the above request:____

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Description of approved distribution method:____

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Disbursement date:____

Stewardship Report due date:____________________________