

Optimist DISASTER RELIEF FUND **GRANT APPLICATION**

Club Name:	Club Number:		
Project Chair:	Phone #:	Email:	
Club President:	Phone #:	Email:	
Please provide the following inform	nation pertaining to your proje	ect. Use additional sheets as necessary.	
1. Primary Purpose:			
2. Amount Requested: \$	Submission Dat	e:	
3. Provide a brief description of the	proposed project and the imp	pact it will have on the community:	
Estimated Project Start Date:	Estimated Pro	ject End Date:	
4. List Specific Goals:			
a. b.			
c.			
d.			
5. What resources will be used? (O	ther funding sources, manua	l resources, donated items, etc.)	

6. Provide a preliminary budget outlining exactly how the granted funds will be utilized. (Please attach)

7. Other Requirements:

Attach a Planning Guide which provides a detailed overview of the project and provide detailed records of how the funds were expended including copies of all receipts.

8. Statement of Acknow	wledgement:	
hereby concur with the a months of the completion	forementioned requirements and will n of the project. I/We acknowledge	(Club President), submit all requested documentation within three that failure to comply with the aforementioned in full or any amount thereof to Optimist
Project Chair		Club President
9. If awarded, to wha	t address will the funds be mailed:	
Name:		
City:	State: Zip:	
	Optimist Internationa	al Use Only:
Approved / Denied	Awarded Amount:	
	Date Funds Sent:	
Comments:		
Optimist International Ex	xecutive Director	

Submit Application with all attachments to:
Optimist International
4494 Lindell Blvd
St. Louis Mo 63031

 $\underline{executive of fice @\,optimist.org}$

Fax: (314) 371.6006

Optimist International retains the rights to request and obtain additional information it may deem necessary for an assessment to grant funding.