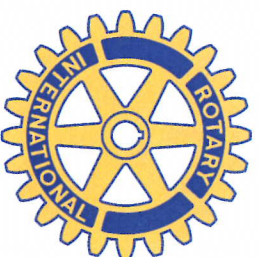


Saint Paul Sunrise Rotary Foundation



Application for Grant Funding

-- To be completed by the organization --

Please submit a copy of your IRS 501c3 along with this application.

Organization Name: _____ Federal Tax ID (EIN) #: (9 digits) _____

Address: _____ City _____ State _____ Zip _____

Contact Name: _____ Contact phone: _____

What service does your organization provide to the community? _____

Will these grant funds directly benefit your LOCAL community? Yes No

Amount requested: _____

Organization Representative: By signing below I acknowledge that this form represents a request for funding, and is not a guarantee of funding. Final approval is subject to the guidelines of the Saint Paul Sunrise Rotary Foundation.

This request will not be processed unless signed by all parties.

Signed: _____ Print Name: _____ Date: _____

Each Day, Rising To Make The Difference!