

### **Charitable Giving Committee**

Thank you for your interest in Fairport (NY) Rotary Club's Charitable Giving program.

Each year, Fairport Rotary Club provides funding assistance to organizations with special financial needs. We evaluate and select recipients twice a year, in the fall and again in the spring. The following is our session schedule:

#### **Fall Session**

- Request for Funding due to Fairport Rotary
  Club by October 31st
- Evaluation period: November
- Notification to organization before Dec. 15<sup>th</sup>

#### **Spring Session**

- Request for Funding due to Fairport Rotary Club by March 31<sup>st</sup>
- Evaluation period: April
- Notification to organization before May 31<sup>st</sup>

The criteria we use for selecting recipients are:

- 1. Does the requesting organization have a 'charitable' structure, i.e. an IRS 501(c) (3) status?
- 2. The extent to which Fairport Rotary Club's donation would impact the requesting organization or the specific program.
- 3. The organization or program's socially redeeming value.
- 4. The value Fairport Rotary Club's image is enhanced by its association with the organization or program.

Organizations or programs requesting support from Fairport Rotary Club should fall into one of the following five categories:

- 1. Youth
- 2. Seniors
- 3. Disabled
- 4. Community
- 5. International/National (i.e. outside our local community)

If your not-for-profit organization is interested in funding assistance from Fairport, please complete the following form and return it in one of the following ways:

E-Mail: Vincent@baronelawoffices.com

Fax: (585) 223-1010 Mail: Vincent M. Barone

> BARONE LAW OFFICES 6 N. Main St Suite 250 Fairport, NY 14450

Thank you, Fairport Rotary Club (NY)

rev. October, 2016



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## **Request for Funding Form**

Organization's Information:
Name
Address
City/State/Zip
Telephone Fax
Web Site
Financial Structure: 501 (c) 3 Other
Organization's Mission, Key Constituency Served, and History:

# **Key Members of Organization's Leadership:** Names/Titles Telephone/E-Mail **Annual Budget and Primary Source of Funding:** Details of Program/Project for which you are Requesting Funding: **Amount Requested:** Note: Please attach any supporting documents about your organization and the program for which you are requesting funding.

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