Blissfield Rotary Club P.O. Box 4

Donation Request Form Blissfield, MI 49228

Date

Organization Information

Name:

Address:

City, State, Zip:

Contact Person:

Phone: Fax:

E-mail: Website:

Summary of Request

Amount Requested: $

Total Project / Program Budget: $

Date funds needed:

Description of Project / Program:

Attach bids or specific

 cost information

List other attempted/possible

 sources of funding:

 Return completed request form to: **Blissfield Rotary Club**

 **Attn: President**

 **P.O. Box 4**

 **Blissfield, MI 49228**