



For RC4K Committee:	
Project approval date	_____
Matching funds from RC4K \$	_____
Receipts received & verified	_____
	Sign and Date
Funds distribution date	_____

Thank you for your interest in supporting the youth in your community! Rotary Cares for Kids partners with District 5010 Rotary Clubs to match funds for projects that make a difference in the lives of youth. Originally started as a program to meet the needs of youth in transition through Office of Children Services, the program has expanded to support a variety of youth targeted projects.

Your project proposal will help the Rotary Cares for Kids committee make a decision on the amount of support your club will receive. You will be notified once your project is reviewed. Once the project is complete you will need to provide proof of spending to obtain club reimbursement.

District 5010 Club: _____
 Mailing Address: _____

Contact: _____
 Phone/Email: _____

Project Narrative:
 (attach sheet if needed)

Project Costs:	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
	Total	\$ _____
	Total funded by Club	\$ _____
	Request from Rotary Cares for Kids	\$ _____

(Note: RC4K will fund up to 50% of club costs toward the project once proof of project completion and spending is provided; this proof may be in the form of cancelled checks or paid invoices and pictures of project. Matching amount is at the discretion of the committee.)