

NEW JERSEY ROTARY CAPITAL DISTRICT FOUNDATION  
APPLICATION FOR USE

DATE OF APPLICATION: \_\_\_\_\_

LEGAL NAME OF ORGANIZATION: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

ORGANIZATION ADDRESS: \_\_\_\_\_

PROJECT LEADER: \_\_\_\_\_

CONTACT INFORMATION: \_\_\_\_\_

PURPOSE OF FUNDS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

APPROXIMATE LENGTH OF PROJECT: \_\_\_\_\_

START DATE: \_\_\_\_\_ END DATE: \_\_\_\_\_

PERSONS AUTHORIZED TO RELEASE FUNDS FROM NEW JERSEY CAPITAL DISTRICT FOUNDATION:

1. \_\_\_\_\_

2. \_\_\_\_\_

PLEASE ATTACH A LETTER OF AUTHORIZATION FROM THE BOARD OF DIRECTORS OF THE SPONSORING ORGANIZATION AUTHORIZING THE USE OF THE NEW JERSEY CAPITAL DISTRICT FOUNDATION FOR THE STATED PURPOSE.

THE NAMES OF THE INDIVIDUALS AUTHORIZED TO DISBURSE THE FUNDS MUST BE LISTED IN THE LETTER.

THE LETTER MUST BE SIGNED BY THE BOARD CHAIR

\_\_\_\_\_

QUESTIONS? - PDG MICHAEL HART, FOUNDATION CHAIRMAN

**Email** - drmhart@yahoo.com - **Phone** - 908-654-7384

Please mail checks to Treasurer Michael Townley, 165 Palmer Avenue, South Plainfield, NJ 07080-2223