



Kiwanis®

Findlay, Ohio

THE KIWANIS MISSION:

**Kiwanis empowers communities to improve the world
by making lasting differences in the lives of children.**

Requested by: _____

Address: _____

Phone: _____

Contact person: _____

Contact e-mail address: _____

Request for:

____ Event Funding ____ Volunteer needs ____ Program service delivery needs

Request Amount \$ _____ Anticipated overall cost of event or program need: \$ _____

1. Explain request in detail:

2. Target audience for event/program: _____

3. Other sources of funding available: _____

4. Dollars needed by what date: _____

5. What will be the direct impact of this request on the community, organization, or clients?

Requests are reviewed by Kiwanis for approval. Programs based on Kiwanis mission (stated above) may take precedence over other requests.

Signature of agency representative: _____ Date submitted: _____

Submit completed form to FindlayKiwanis@gmail.com