

## LEXINGTON LIONS CLUB

## Request For Charitable Donation

Please email your completed form to beac@twc.com

Submitted By					Phone		
,	Lion Or Organization Member Making Req			quest	est EMAIL		
Committee Or Org	anization						
Address							
Primary Function _							
Other Sources of I	ncome						
2 22 4		United Way,	Endowments,	Other Org	anizations, etc.		
Percent of Total Ex							
Other	% Explain						
Prior Funds From	This Club	Year	_Amount		Year	_Amount _	
Year Amou	nt	Year _	Amou	ınt			
Current year Budg	jet						
Amount Requeste	d						
Is your organizatio	n qualified to	accept fund	s under IRS	S Provisio	on 501(c)(3)? _		
If so, what is your l	Federal Emp	loyer Numbe	er?				
And date of determ	nination?						

Please include your annual report with this request. Thank you.

Please list your reasons why Lexington	Lions Club Charitable Funds should be granted to your
organization or committee:	
Signed	Date
•	
Dolou Thio	Line To De Completed Du Lione
<u>Delow This</u>	s Line To Be Completed By Lions
Dessived Dy Lies	Data
Received By Lion	
Investigator's Report and Recommendatio	on
Investigator	Date
<b>-</b>	
Finance Committee Action	
	Date