

Georgia District Civitan Foundation, Inc.

Louise Crapps, Chair
Matching Grants Committee
2454 Monterey Drive NE
Marietta, GA 30068-3050

(For Civitan Year Oct 1, 2017 - Oct 1, 2018)

Matching Grant Request Form

Official Application

Club Name: _____ Contact Name: _____

Contact Phone: _____ Club Size: _____

Name of Project: _____

Location of Project: _____

Est. Start Date: _____ Est. Completion Date: _____

The major purpose of our Foundation's Matching Grant Program is to help Civitan Clubs with local service projects which do not have other sources of funding and which, without grants from the Foundation, might not be feasible.

Describe the project. Please describe in detail who will benefit from this project. (Attach additional pages, if needed.)

What will be the results of the project if a Matching Grant is not granted for this project?

Describe actual costs in detail: (Attach additional pages, if needed.)

What is the requested amount of the Matching Grant? (Matching Grants are currently limited to _____ to any one club in a single year.)

Describe how this project increases Civitan Awareness: (Attach pages, if needed.)

How many Civitan man-hours are anticipated to complete this project?

How many Non-Civitan man-hours are anticipated to complete this project?

Signature: _____ Date: _____

Position: _____

Please mail completed request form to the Georgia District Civitan Foundation, Inc. at the address at the top of the first page by the 15th day of the last month of any quarter for consideration by the Foundation Board at its next meeting.

GEORGIA DISTRICT CIVITAN FOUNDATION, INC.

JOINT SPONSORSHIP APPLICATION
(For Civitan Year October 1, 2015 to September 30, 2016)

1. 1. Name and type of joint event: _____

1. 2. Description and purpose of the joint event: _____

1. 3. Sponsoring organization(s) club(s) or district: _____

1. 4. Contact Person: _____
2. 5. Address: _____
3. 6. Telephone: _____ Email: _____
4. 7. Beginning and ending date of the joint event: _____
5. 8. Purpose of the joint event: _____

1. 9. Distribution of the net proceeds from the joint event: _____

1. 10. Names of other participating organizations: _____

[Answer the following questions by initialing block "yes" or "no"]

1. 11. Is evidence of liability insurance coverage attached?
Yes: [_____] No: [_____].
1. 12. Will all requisite permits and governmental approvals necessary for the joint event be obtained?
Yes: [_____] No: [_____].
1. 13. Is applicant in good standing with Civitan International?
Yes: [_____] No: [_____].
1. 14. Is applicant incorporated?
Yes: [_____] No: [_____].
1. 15. Has applicant filed its annual registration with the Secretary of State for Georgia?
Yes: [_____] No: [_____].
1. 16. Is the joint event consistent with the articles of incorporation, bylaws and policies of the Georgia District Civitan Foundation, Inc. ("Foundation") and Civitan International?
Yes: [_____] No: [_____].
1. 17. Will the net proceeds from the event be used exclusively for authorized charitable purposes?
Yes: [_____] No: [_____].
1. 18. Will all contracts, agreements, advertisements, and forms identify the event as being co-sponsored by the Foundation?
Yes: [_____] No: [_____].
1. 19. Will the applicant keep complete and detailed financial records for the event and, upon request, make such records available to the Foundation for review and/or inspection?
Yes: [_____] No: [_____].
1. 20. Will the receipts and disbursements for the joint event be separately accounted for and a report provided to the Foundation?
Yes: [_____] No: [_____].
1. 21. Will the net proceeds from the event be distributed only for charitable purposes, which may include but not be limited to, the Foundation, Civitan International, Civitan International Research Center or other IRC §501(c) 3 organization and community charities?
Yes: [_____] No: [_____].

If no please attach a written explanation regarding the use of the net proceeds from this event.

1. 22. Will any part of the net proceeds from the event inure to the personal benefit of any private individual affiliated in any manner with the club, district or Foundation?

Yes: [_____] No: [_____].

1. 23. Does the applicant understand that the Foundation is an IRC§501(c) 3 organization and contributions to the event may be deemed charitable contributions for federal income tax purposes and that contributors will be notified to review the contribution with their personal tax advisor to determine if the contribution is in fact deductible?

Yes: [_____] No: [_____].

1. 24. Will the applicant encourage its members to obtain life membership status in the Foundation?

Yes: [_____] No: [_____].

1. 25. Does the applicant indemnify and hold harmless the Georgia District Civitan Foundation, Inc. from any loss, damage, claim or liability (including reasonable attorney fees) incurred by reason of the Member's gross negligence or willful misconduct?

Yes: [_____] No: [_____].

Addition Remarks or Explanations

(attach additional pages if needed)

Georgia Sales Tax Exemption.

The foundation, club, district, or joint event manager may use the attached Letter of Authorization issued to the foundation by the Georgia Department of Revenue to purchase qualified personal property for the joint event, tangible personal property and services in Georgia without payment of Georgia sales and use tax. A copy of the Letter of Authorization must be provided to each supplier of qualifying purchases. The Letter of Authorization may only be utilized for joint event aggregate purchases of \$1,000.00 or more.

Certification

Applicant certifies that this application is authorized by the sponsoring Civitan Club and that the person(s) signing below are authorized by the Civitan Club to execute and submit this application. The answers to the questions above are true and correct to the best of the knowledge of the persons executing this application. Furthermore the Civitan Club indemnifies and holds

harmless the Georgia District Civitan Foundation, Inc. from any loss, damage, claim or liability (including reasonable attorney fees) incurred by reason of any of its member's gross negligence or willful misconduct in connection with the event.

| | |
|---|---|
| Signature: | Signature: |
| Event Coordinator or Manager | Club President or District Governor |
| Print Name: | Print Name: |
| Signature: | Signature: |
| Club Treasurer or District Treasurer | Club Secretary or District Secretary |
| Print Name: | Print Name: |

Date submitted:

Submit Application to one of the Following Foundation Trustees:

| | |
|---|--|
| Gerald Smith, Chair 136 Greenwood Drive Americas, GA 31709-4860 gc_smith@bellsouth.net | Wayne Howell, Treasurer 715 Tee Box Drive Griffin, GA 30223 HWHowell@me.com |
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Joint Sponsorship applications must be timely filed on the joint sponsorship form provided by the Foundation during the planning stages of the event. The trustees will review the application at its next meeting. If appropriate the chairperson may forward the application to the Trustees for their consideration and vote by telephone or email. The chairperson shall promptly notify the applicant of the trustee's decision.

Date Received by Foundation:

Date Approved by Foundation: