



# Project FOCUS

*Funding Our Communities Under Stress*

## Project FOCUS Grant Completion

To be submitted by the Club or District designated point of contact who requested funds.

P.O. Box 487

Dublin, VA 24084

[projectfocus@ruritan.org](mailto:projectfocus@ruritan.org)

EIN (Employee Identification Number – must be provided): \_\_\_\_\_

What was the Grant For? \_\_\_\_\_

Amount Approved: \_\_\_\_\_ Total Amount Spent: \_\_\_\_\_

Date Project Started: \_\_\_\_\_ Date Finished: \_\_\_\_\_

Name of Club or District: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Name

Title

Address: \_\_\_\_\_

Street or Post Office Box

Address: \_\_\_\_\_

City or Town

State

Zip Code

Phone Number: \_\_\_\_\_

Cell

Home

Email Address \_\_\_\_\_

**To protect the Project FOCUS 501(c)(3) status, you must provide Project FOCUS with information to substantiate the use of funds awarded, such as copies of invoices, pictures of equipment purchased, or a statement describing specifically how the funds were used.**

NAME OF CLUB or DISTRICT \_\_\_\_\_

SIGNATURE/TITLE OF REPRESENTATIVE \_\_\_\_\_

DATE \_\_\_\_\_

Date Zone and or District Governor notified of Grant completed \_\_\_\_\_

Date Assigned National Director notified of Grant completed \_\_\_\_\_