



THE ROTARY FOUNDATION

of Rotary International

1560 Sherman Avenue
Evanston, IL 60201-3698 USA

03 November 2005

Host Cosponsor

Raphael Sassa, Project Contact
Rotary Club of Kinshasa-Binza (D - 9150)
6 Avenue de la Ferme
CD Kinshasa 1 Congo, Democratic Rep. of
ralph.sassa@gmx.net

International Cosponsor

Jacques Valette, Project Contact
Rotary Club of Romans (D - 1780)
1, Rue Marius Moutet
FR-26300 Bourg de Peage France
jac.valette@wanadoo.fr

Ref: Matching Grant #58149

Dear Rotarians Sassa and Valette,

Congratulations! Your Major Matching Grant application, submitted by Rotary Club of Kinshasa-Binza and Rotary Club of Romans for funding to help provide literacy in four disadvantaged neighbourhoods in Kinshasa, Congo, has been approved by The Rotary Foundation (TRF). The award is in the amount of US\$7,125.00.

This letter is your formal notification and describes the enclosed forms. In all cases, the primary partners must both sign the **Agreement Form** and ensure correct **Payee Information** is sent to TRF. Any additional information and/or sponsor contributions TRF requires in order to make grant payment are described in the Agreement Form and the **Sponsor Contributions Form**.

- A. **Agreement Form.** Be certain to refer to this document throughout the implementation of the project to help ensure compliance with TRF requirements.
- B. **Sponsor Contributions Form.** This form gives instructions for sending cash (non SHARE/DDF) contributions to TRF. It is not included if your project is financed solely through SHARE/DDF contributions.
- C. **Payee Information Form.** Coordinate with your partner to establish an appropriate payee. Complete and return the form to inform TRF where the grant payment should be sent.
- D. **Payment is contingent on sponsors providing a breakdown of miscellaneous expenses at US \$875.**

Each partner is sent a copy of the forms. The same document need not be signed by all partners. Keep a copy of the signed forms for your records before returning the forms to TRF. Faxes are acceptable, and originals are not required. It is extremely important to remain in constant contact with your partner to ensure the above requirements are completed.

Additional information you will find helpful is included. (If you are receiving this document via e-mail, please see the accompanying e-mail message for links to the documents on the RI website.)

1. **Terms and Conditions of Matching Grant Award.** Read this document carefully, and refer to it when you have questions about TRF requirements.
2. **Report Form.** Reporting on your project is mandatory. Progress reports are due every twelve months, and a Final Report must be submitted within two months of your project's completion.
3. **Humanitarian Programs Promotional Guide** has information about how to promote in your community and in the media. A promotional plan is required before payment will be issued for grant awards of US\$25,001 or more.
4. **Paul Harris Fellow Recognition/Contribution Form** can be used to receive Paul Harris Fellow (PHF) credit for cash contributions sent to TRF.
5. **Making Your Sponsor Contributions Form.** This form gives instructions about sending cash contributions to TRF, particularly for clubs/districts outside the USA. It is not included if your project is financed solely through SHARE/DDF contributions.

If you have any questions, please contact me.

Sincerely,



Del Phillips
Grant Coordinator
Humanitarian Grants Staff
Phone: (847) 866-3336
Email: PhillipD@rotaryintl.org
Fax: (847) 866-9759

cc: Raphael Sassa, President, Rotary Club of Kinshasa-Binza (D - 9150), RI
Bernard Hauss, President, Rotary Club of Romans (D - 1780), RI

Enclosures: Matching Grant Agreement Form, Sponsor Contributions Form (if applicable), Payee Information Form, *Terms and Conditions of Matching Grant Award*, Report Form, Humanitarian Programs Promotional Guide, Paul Harris Fellow Recognition Form, and Making Your Sponsor Contributions Form (if applicable).



THE ROTARY FOUNDATION

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1560 Sherman Avenue
Evanston, IL 60201-3698 USA

MATCHING GRANT AGREEMENT FORM

MATCHING GRANT #58149

This Matching Grant Agreement ("Agreement") is entered into by and between Rotary Club of Kinshasa-Binza, Rotary Club of Romans ("The Partners") and The Rotary Foundation of Rotary International ("TRF"). TRF agrees to pay the Partners a Matching Grant in the total amount of US\$7,125.00 to help provide literacy in four disadvantaged neighbourhoods in Kinshasa, Congo. In consideration of receiving this Matching Grant from TRF, the Partners acknowledge and agree that:

- 1) The Partners have each received and read a copy of the Terms and Conditions of Matching Grant Award and will abide by all terms and conditions set forth therein.
- 2) Rotary Club of Romans will coordinate the project internationally and will contribute US\$350.00 to the project. Rotary Club of Kinshasa-Binza will coordinate the project locally and will contribute US\$2,000.00 to the project. In addition, the Partners will ensure that the following contributions are submitted: Rotary Club of Paris La Défense, US\$1,000.00 (820 EUR); and Rotary Club of Châtillon-sur-Chalaronne--Vonnas, US\$500.00 (410 EUR); and Rotary Club of Bruxelles-Erasme, US\$1,000.00(800 EUR); and Rotary Club of Bruxelles-Sud, Brabant, US\$1,000.00 (800 EUR); and Rotary Club of Lyon-Villeurbanne, US\$500.00 (410 EUR); and Rotary Club of Lyon-Val de Saône, US\$500.00 (410 EUR). The following districts will provide SHARE (DDF) Fund contributions: D-1710, US\$1,000.00; and D-1780, US\$1,700.00; and D-9150, US\$1,000.00. Any amount received in excess of the aforementioned contributions will automatically be counted as general giving to The Rotary Foundation and will not be applied to Matching Grant #58149.
- 3) All Matching Grant funds provided by TRF for this project shall not be used for any purposes other than those approved by TRF. TRF shall be entitled to receive reimbursement for any and all funds deposited with, held by, or otherwise contributed to either or both of the Partners that are spent for unapproved purposes as well as any funds used to benefit a Rotarian or Rotary entity. In addition, TRF reserves the right to audit the project at any time and suspend any or all payments if in its sole discretion progress is not considered to be satisfactory.
- 4) The Partners will keep TRF informed on the project's progress by submitting progress reports every twelve months during the implementation of the project. The Partners will immediately inform TRF of any significant problems with the implementation of the project or deviations from the project, including deviations in the budget. The Partners will submit the final report with complete financial accounting within two months of the project's completion.
- 5) The Partners shall defend, indemnify, and hold harmless RI, TRF, their respective directors, trustees, officers, and employees (collectively "RI/TRF") from any and all damages, losses, judgments, costs, fines, awards, liabilities, or expenses, including without limitation reasonable attorney's fees and costs of litigation, asserted or recovered from RI/TRF, that result or arise directly or indirectly from the project including any acts or omissions of the Partners.

6) The entire responsibility of TRF is expressly limited to payment of US\$7,125.00 plus all SHARE fund contributions. Neither RI nor TRF assumes any further responsibility in connection with this project.

7) TRF reserves the right to cancel this Agreement without notice upon the failure of either or both of the Partners to abide by terms set forth in this Agreement and the Terms and Conditions of Matching Grant Award. Upon cancellation, TRF shall be entitled to a refund of any Matching Grant funds, including any interest earned, that have not been expended pursuant to the terms and conditions of the approved Matching Grant project at the time of cancellation.

8) This Agreement will automatically terminate in the event of the failure of either or both of the Partners to comply with the Matching Grant Terms and Conditions or this Agreement due to an act of God, strike, war, riot, civil unrest, hurricane, earthquake or other natural disasters, acts of public enemies, or any reason beyond the reasonable control of the parties. In such an event, the Partners shall refund to TRF all unexpended Matching Grant funds within 30 days of termination.

9) This agreement is governed by the laws of the State of Illinois, USA. Any action brought in connection with this Agreement shall be filed in the County of Cook, State of Illinois, USA. The Partners agree to submit to the jurisdiction of the Circuit Court of Cook County for the State of Illinois.

10) Payment is contingent on sponsors providing a breakdown of miscellaneous expenses at US \$875.

By signing below, I certify that my Rotary club/district acknowledges and accepts the terms and conditions of this Agreement and the Matching Grant Award and Acceptance.

Dated this _____ day of _____ 20 _____

President
Rotary Club of Kinshasa-Binza

President
Rotary Club of Romans

Staff Initials DP



THE ROTARY FOUNDATION

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1560 Sherman Avenue

Evanston, IL 60201-3698 USA

MATCHING GRANT #58149

SPONSOR CONTRIBUTIONS FORM

FOR the Rotary Club of Châtillon-sur-Chalaronne--Vonnas

This form indicates what method of payment your club will use in contributing to your Matching Grant project.

As a Sponsor of Matching Grant #58149, the Rotary Club of Châtillon-sur-Chalaronne--Vonnas will contribute US\$500.00, which represents the Rotary Club of Châtillon-sur-Chalaronne--Vonnas's portion of the funding for this project.

Name of person completing this form: _____

Telephone Number: _____

Email Address: _____

There are four options of contributing toward a project. Please choose one and follow the steps below.

- OPTION 1 Forwarding the funds to the project account
- OPTION 2 Check
- OPTION 3 Wire/Bank Transfer
- OPTION 4 Credit Card

Please note that:

- The average processing time for contributions is three to six weeks, unless they are forwarded directly to the project.
- If contributions were forwarded to The Rotary Foundation prior to the approval date of this grant, those funds may not be available for this project.

For Paul Harris Fellow Recognition, please also send a completed copy of the Paul Harris Fellow (PHF) Contribution Form. (Funds forwarded directly to a project account, as described under Option One, are ineligible for PHF Recognition.) The PHF Recognition Form is available on the RI website at <http://www.rotary.org/newsandinfo/downloadcenter/pdfs/123en.pdf>

-
- OPTION ONE: Forwarding the contribution to the project account

Please note:

- No Paul Harris Fellow Recognition credit will be awarded for the contribution.
- You must send confirmation that the contribution has been received for the project (a letter from the project beneficiary, copy of deposit slip or paid invoice, etc.) to:

Del Phillips
The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

OPTION TWO: Check

Please send your *agreement form*, and *payee information form* to:

Del Phillips
The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

Please see the attached appendix or www.rotary.org for geographic specific instructions for submitting your contribution via a Check.

*****Please remember to write **MG #58149** on check.*****

OPTION THREE: Wire/Bank Transfer

Please send your *agreement form*, and *payee information form* to:

Del Phillips
The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

Please see the attached appendix or www.rotary.org for geographic specific instructions for submitting your contribution Wire/Bank Transfer.

*****Please indicate **MG #58149** in wire/bank transfer remitter area.*****

OPTION FOUR: Credit Card

Please complete this section, and return to The Rotary Foundation, One Rotary Center
1560 Sherman Avenue, Evanston, IL 60201-3698 USA, or fax to (847) 866-9759.

Please process my contribution of US\$_____

Designation: Matching Grant #58149

Please charge my __Visa, __Master Card, __Discover, __Diners Club, __American Express

Account#: _____ Expiration Date: (_____/_____)
Month Year

Signature: _____ Today's Date: _____

Name (as it appears on the credit card): _____

Address: _____ City/State: _____

Zip Code/Postal Code: _____ Country: _____

Staff Initials DP



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of Rotary International

1560 Sherman Avenue

Evanston, IL 60201-3698 USA

MATCHING GRANT #58149

**SPONSOR CONTRIBUTIONS FORM
FOR the Rotary Club of Lyon-Villeurbanne**

This form indicates what method of payment your club will use in contributing to your Matching Grant project.

As a Sponsor of Matching Grant #58149, the Rotary Club of Lyon-Villeurbanne will contribute US\$500.00, which represents the Rotary Club of Lyon-Villeurbanne's portion of the funding for this project.

Name of person completing this form: _____

Telephone Number: _____

Email Address: _____

There are four options of contributing toward a project. Please choose one and follow the steps below.

- OPTION 1 Forwarding the funds to the project account
- OPTION 2 Check
- OPTION 3 Wire/Bank Transfer
- OPTION 4 Credit Card

Please note that:

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-
- OPTION ONE: Forwarding the contribution to the project account

Please note:

- No Paul Harris Fellow Recognition credit will be awarded for the contribution.
- You must send confirmation that the contribution has been received for the project (a letter from the project beneficiary, copy of deposit slip or paid invoice, etc.) to:

Del Phillips
The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

OPTION TWO: Check

Please send your *agreement form*, and *payee information form* to:

Del Phillips
The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

Please see the attached appendix or www.rotary.org for geographic specific instructions for submitting your contribution via a Check.

*****Please remember to write **MG #58149** on check.*****

OPTION THREE: Wire/Bank Transfer

Please send your *agreement form*, and *payee information form* to:

Del Phillips
The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

Please see the attached appendix or www.rotary.org for geographic specific instructions for submitting your contribution Wire/Bank Transfer.

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OPTION FOUR: Credit Card

Please complete this section, and return to The Rotary Foundation, One Rotary Center
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Please process my contribution of US\$_____

Designation: Matching Grant #58149

Please charge my __ Visa, __ Master Card, __ Discover, __ Diners Club, __ American Express

Account#: _____ Expiration Date: (_____/_____)
Month Year

Signature: _____ Today's Date: _____

Name (as it appears on the credit card): _____

Address: _____ City/State: _____

Zip Code/Postal Code: _____ Country: _____

Staff Initials DP



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1560 Sherman Avenue
Evanston, IL 60201-3698 USA

MATCHING GRANT #58149

**SPONSOR CONTRIBUTIONS FORM
FOR the Rotary Club of Lyon-Val de Saône**

This form indicates what method of payment your club will use in contributing to your Matching Grant project.

As a Sponsor of Matching Grant #58149, the Rotary Club of Lyon-Val de Saône will contribute US\$500.00, which represents the Rotary Club of Lyon-Val de Saône's portion of the funding for this project.

Name of person completing this form: _____

Telephone Number: _____

Email Address: _____

There are four options of contributing toward a project. Please choose one and follow the steps below.

- OPTION 1 Forwarding the funds to the project account
- OPTION 2 Check
- OPTION 3 Wire/Bank Transfer
- OPTION 4 Credit Card

Please note that:

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-
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Please note:

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The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

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1560 Sherman Avenue, Evanston, IL 60201-3698 USA, or fax to (847) 866-9759.

Please process my contribution of US\$_____

Designation: Matching Grant #58149

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Account#: _____ Expiration Date: (_____/_____)
Month Year

Signature: _____ Today's Date: _____

Name (as it appears on the credit card): _____

Address: _____ City/State: _____

Zip Code/Postal Code: _____ Country: _____

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MATCHING GRANT #58149

**SPONSOR CONTRIBUTIONS FORM
FOR the Rotary Club of Paris La Défense**

This form indicates what method of payment your club will use in contributing to your Matching Grant project.

As a Sponsor of Matching Grant #58149, the Rotary Club of Paris La Défense will contribute US\$1,000.00, which represents the Rotary Club of Paris La Défense's portion of the funding for this project.

Name of person completing this form: _____

Telephone Number: _____

Email Address: _____

There are four options of contributing toward a project. Please choose one and follow the steps below.

- OPTION 1 Forwarding the funds to the project account
- OPTION 2 Check
- OPTION 3 Wire/Bank Transfer
- OPTION 4 Credit Card

Please note that:

- The average processing time for contributions is three to six weeks, unless they are forwarded directly to the project.
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For Paul Harris Fellow Recognition, please also send a completed copy of the Paul Harris Fellow (PHF) Contribution Form. (Funds forwarded directly to a project account, as described under Option One, are ineligible for PHF Recognition.) The PHF Recognition Form is available on the RI website at <http://www.rotary.org/newsandinfo/downloadcenter/pdfs/123en.pdf>

-
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The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

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The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

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The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

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*****Please indicate **MG #58149** in wire/bank transfer remitter area.*****

OPTION FOUR: Credit Card

Please complete this section, and return to The Rotary Foundation, One Rotary Center
1560 Sherman Avenue, Evanston, IL 60201-3698 USA, or fax to (847) 866-9759.

Please process my contribution of US\$_____

Designation: Matching Grant #58149

Please charge my __ Visa, __ Master Card, __ Discover, __ Diners Club, __ American Express

Account#: _____ Expiration Date: (_____/_____)
Month Year

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MATCHING GRANT #58149

SPONSOR CONTRIBUTIONS FORM
FOR the Rotary Club of Bruxelles-Erasme

This form indicates what method of payment your club will use in contributing to your Matching Grant project.

As a Sponsor of Matching Grant #58149, the Rotary Club of Bruxelles-Erasme will contribute US\$1,000.00, which represents the Rotary Club of Bruxelles-Erasme's portion of the funding for this project.

Name of person completing this form: _____

Telephone Number: _____

Email Address: _____

There are four options of contributing toward a project. Please choose one and follow the steps below.

- OPTION 1 Forwarding the funds to the project account
- OPTION 2 Check
- OPTION 3 Wire/Bank Transfer
- OPTION 4 Credit Card

Please note that:

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Del Phillips
The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

OPTION TWO: Check

Please send your *agreement form*, and *payee information form* to:

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The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

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1560 Sherman Avenue, Evanston, IL 60201-3698 USA, or fax to (847) 866-9759.

Please process my contribution of US\$_____

Designation: Matching Grant #58149

Please charge my __ Visa, __ Master Card, __ Discover, __ Diners Club, __ American Express

Account#: _____ Expiration Date: (_____/_____)
Month Year

Signature: _____ Today's Date: _____

Name (as it appears on the credit card): _____

Address: _____ City/State: _____

Zip Code/Postal Code: _____ Country: _____

Staff Initials DP



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of Rotary International

1560 Sherman Avenue
Evanston, IL 60201-3698 USA

MATCHING GRANT #58149

SPONSOR CONTRIBUTIONS FORM FOR the Rotary Club of Bruxelles-Sud, Brabant

This form indicates what method of payment your club will use in contributing to your Matching Grant project.

As a Sponsor of Matching Grant #58149, the Rotary Club of Bruxelles-Sud, Brabant will contribute US\$1,000.00, which represents the Rotary Club of Bruxelles-Sud, Brabant's portion of the funding for this project.

Name of person completing this form: _____

Telephone Number: _____

Email Address: _____

There are four options of contributing toward a project. Please choose one and follow the steps below.

- OPTION 1 Forwarding the funds to the project account
- OPTION 2 Check
- OPTION 3 Wire/Bank Transfer
- OPTION 4 Credit Card

Please note that:

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Del Phillips
The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

OPTION TWO: Check

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Del Phillips
The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

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1560 Sherman Avenue, Evanston, IL 60201-3698 USA, or fax to (847) 866-9759.

Please process my contribution of US\$_____

Designation: Matching Grant #58149

Please charge my __ Visa, __ Master Card, __ Discover, __ Diners Club, __ American Express

Account#: _____ Expiration Date: (_____/_____)
Month Year

Signature: _____ Today's Date: _____

Name (as it appears on the credit card): _____

Address: _____ City/State: _____

Zip Code/Postal Code: _____ Country: _____

Staff Initials DP



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Evanston, IL 60201-3698 USA

MATCHING GRANT #58149

SPONSOR CONTRIBUTIONS FORM
FOR the Rotary Club of Kinshasa-Binza

This form indicates what method of payment your club will use in contributing to your Matching Grant project.

As a Sponsor of Matching Grant #58149, the Rotary Club of Kinshasa-Binza will contribute US\$2,000.00, which represents the Rotary Club of Kinshasa-Binza's portion of the funding for this project.

Name of person completing this form: _____

Telephone Number: _____

Email Address: _____

There are four options of contributing toward a project. Please choose one and follow the steps below.

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- OPTION 2 Check
- OPTION 3 Wire/Bank Transfer
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1560 Sherman Avenue, Evanston, IL 60201-3698 USA, or fax to (847) 866-9759.

Please process my contribution of US\$_____

Designation: Matching Grant #58149

Please charge my __Visa, __Master Card, __Discover, __Diners Club, __American Express

Account#: _____ Expiration Date: (_____/_____)
Month Year

Signature: _____ Today's Date: _____

Name (as it appears on the credit card): _____

Address: _____ City/State: _____

Zip Code/Postal Code: _____ Country: _____

Staff Initials DP



THE ROTARY FOUNDATION

of Rotary International

1560 Sherman Avenue
Evanston, IL 60201-3698 USA

MATCHING GRANT #58149

SPONSOR CONTRIBUTIONS FORM
FOR the Rotary Club of Romans

This form indicates what method of payment your club will use in contributing to your Matching Grant project.

As a Sponsor of Matching Grant #58149, the Rotary Club of Romans will contribute US\$350.00, which represents the Rotary Club of Romans's portion of the funding for this project.

Name of person completing this form: _____

Telephone Number: _____

Email Address: _____

There are four options of contributing toward a project. Please choose one and follow the steps below.

- OPTION 1 Forwarding the funds to the project account
- OPTION 2 Check
- OPTION 3 Wire/Bank Transfer
- OPTION 4 Credit Card

Please note that:

- The average processing time for contributions is three to six weeks, unless they are forwarded directly to the project.
- If contributions were forwarded to The Rotary Foundation prior to the approval date of this grant, those funds may not be available for this project.

For Paul Harris Fellow Recognition, please also send a completed copy of the Paul Harris Fellow (PHF) Contribution Form. (Funds forwarded directly to a project account, as described under Option One, are ineligible for PHF Recognition.) The PHF Recognition Form is available on the RI website at <http://www.rotary.org/newsandinfo/downloadcenter/pdfs/123en.pdf>

-
- OPTION ONE: Forwarding the contribution to the project account

Please note:

- No Paul Harris Fellow Recognition credit will be awarded for the contribution.
- You must send confirmation that the contribution has been received for the project (a letter from the project beneficiary, copy of deposit slip or paid invoice, etc.) to:

Del Phillips
The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

OPTION TWO: Check

Please send your *agreement form*, and *payee information form* to:

Del Phillips
The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

Please see the attached appendix or www.rotary.org for geographic specific instructions for submitting your contribution via a Check.

*****Please remember to write **MG #58149** on check.*****

OPTION THREE: Wire/Bank Transfer

Please send your *agreement form*, and *payee information form* to:

Del Phillips
The Rotary Foundation
1560 Sherman Avenue
Evanston, IL 60201 USA

Please see the attached appendix or www.rotary.org for geographic specific instructions for submitting your contribution Wire/Bank Transfer.

*****Please indicate **MG #58149** in wire/bank transfer remitter area.*****

OPTION FOUR: Credit Card

Please complete this section, and return to The Rotary Foundation, One Rotary Center
1560 Sherman Avenue, Evanston, IL 60201-3698 USA, or fax to (847) 866-9759.

Please process my contribution of US\$_____

Designation: Matching Grant #58149

Please charge my __ Visa, __ Master Card, __ Discover, __ Diners Club, __ American Express

Account#: _____ Expiration Date: (_____/_____)
Month Year

Signature: _____ Today's Date: _____

Name (as it appears on the credit card): _____

Address: _____ City/State: _____

Zip Code/Postal Code: _____ Country: _____

Staff Initials DP

| |
|---|
| PAYEE INFORMATION FORM FOR MATCHING GRANT #58149 |
|---|

Return this completed form along with the Agreement to TRF for the release of funds.

Please note the following:

- The project bank account must be a Rotary club- or district-controlled account.
- Payments will not be made payable to an individual, cooperating organization or beneficiary.
- Please provide the exact name on the account, which must be 40 characters or less.
- Payments that are misdirected due to incomplete or incorrect payee information will be the club or district's responsibility.

SECTION A: Project Bank Account

Project Bank Account Name (Account Holder Name): _____

Project Complete Bank Account Number: _____

Account Currency (USD or local currency): _____

Project Bank Name: _____

Project Bank Street Address: _____

Bank Telephone / Fax Numbers: _____

ABA Routing # (U.S. banks only): OR

SWIFT (BIC) Code, or other required bank code(s) (specify code) (non-U.S. banks): _____

For international US\$ wire transfers, you must include your bank's intermediary/correspondent bank information. Please contact your bank to obtain information requested below.

SECTION B: Intermediary/Correspondent Bank Information

Intermediary/Correspondent Bank Name: _____

Intermediary/Correspondent Bank Street Address: _____

ABA Routing # (U.S. banks only): OR

SWIFT (BIC) Code, or other required bank code(s) (specify code) (non-U.S. banks): _____

SECTION C: Project Account Signatories

Provide the names of two Rotarians who will be the signatories on the project account and responsible for receipt and disbursement of grant funds:

| | | |
|------------|--|--|
| Name: | | |
| Title: | | |
| Address: | | |
| | | |
| Telephone: | | |
| Fax: | | |
| Email: | | |

IF YOU HAVE QUESTIONS ABOUT THIS FORM, PLEASE CONTACT YOUR PROGRAM COORDINATOR Del Phillips, AT TEL: (847) 866-3336, FAX: (847) 866-9759, OR E-MAIL: PhillipD@rotaryintl.org.

Staff Initials DP