Lebanon Optimist Club Request for Funds APPLICATION

Name of Applicant/Title	
Address	
Phone Number	e-mail address
Title of Project	
Project Description	
• How many children	will these funds impact?
• What do you want to	o achieve as a result of these funds?
Funding Amount \$	
Have you received a donati	on from Lebanon Optimist Club within the last year?
If approved, to whom shoul	d the check be made payable:
Signature of individual sub	mitting the request
Date	Mail to: Lebanon Optimist Club, Funding Program P.O. Box 778 Lebanon, Ohio 45036