

## District Grant Application

<b>Rotary Club of:</b> Laguna Beach	<b>Date:</b> 6/13/24
<b>Project Name/Title:</b> Friendship Shelter Transition Care Packages & Support	
<b>Project Leader Name:</b> Pati Stoop	<b>Phone #:</b> 949-939-4167
<b>Project Leader Email:</b> patistoop@me.com	

**1. Please provide a brief description of the project, and indicate the project beneficiaries (who is being served?):**

Purchase and distribute Care Packages of cleaning supplies and equipment to homeless persons moving from Friendship Shelter to transition apartments. Friendship shelter distributes supplies, and equipment to individuals moving from shelter to transitional apartments managed by Friendship Shelter.

Appreciation event for Friendship management and employees for their hard work and service. A celebration event will be prepared by club members to honor their service.

**2. Indicate the project start and end dates:** *(The project may not begin prior to the district receiving approval from TRF. Reimbursements for earlier expenses are not eligible. Projects must have an end date no later than the end of the Rotary year.)*

Project start date:	7/01/2024
Project end date:	6/30/2025

**3. Project location (select one):**      **Community**      **Mexico**

*(If the project is in Mexico, will there be a Rotary club from Mexico involved in the project? If so, indicate the name of the Rotary club and explain the members' involvement.)*

N/A

**4. List the project funding amounts** *(Club contribution must be equal to or greater than the amount requested from the district):*

Club contribution:	\$	900
District DDF (amount requested from district):	\$	900
Other participating clubs - list club name(s) and contribution amount(s) below:		
	\$	
	\$	
<b>Grant Project - Total</b>	<b>\$</b>	<b>1,800</b>



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5. **Indicate whether there is other involvement and financial support** *(If non-Rotary organizations will be involved in your club project, please describe the involvement and any financial support you are receiving for the project – for example, in-kind contributions, discounts, cash donations):*

N/A

6. **Describe the participation of club members** *(Your club members must be actively involved in this project. Please indicate how many members of your club will participate in this project and describe their activities):*

Members (3) will research and purchase various items. Members (2-3) will coordinate with personnel for delivery. Members (5) to organize an appreciate event for counselors and Friendship Shelter personnel.

7. **Describe how funds will be safeguarded and tracked** *(If funds are to be distributed to a partner in Mexico who will be responsible for the funds? How will transfers of funds to Mexico be handled?):*

Members will submit receipts via Club's standard check request form. Any vendors to submit invoice for payment. All funds to be managed by the Club Treasurer.

8. **Describe how your club will use the project funds (list the types of expenses / items to be purchased):**

Purchase of cleaning supplies and equipment after consulting with Friendship Shelter as to specific needs. Purchase food, drinks and other items for the celebration event prepared by club members to honor counselors and Friendshelter personnel for their service.