

Matching Grants Application The Rotary Foundation (TRF)

PROJECT DESCRIPTION

Explanation: Matching Grants support the humanitarian service projects of Rotary clubs and districts. In this section, describe in detail the humanitarian need your project will address, the intent of the project, how the project will be implemented, and how Rotarians will be directly involved in the project. Involvement is required of both the host and international partners.

Please provide the name of the project site, the city or village, state or province, and country. List multiple locations, if applicable.

Project site: Memphis

City/Village: Memphis

State/Province: Tenn/USA

Country: USA

Describe the project and the problem or need it will address, including the intended beneficiaries and how the project will benefit the community in need. Provide the estimated length of time needed to complete the project.

St Judes Hospital is known internationally for finding cures and saving children with cancer and other catastrophic diseases. This hospital shares its discoveries with scientific and medical facilities around the world. Medical equipment will be purchased with these funds.

No children are turned away because of lack of funds.

Describe how the benefiting community will maintain this project after grant funding has been fully expended.

St Judes has been in existed for many years. They will continue to function after our help.

Describe specific activities of the host and international partners in implementing the project. What will the Rotarians who are members of the partner clubs do during the project? Please note that financial support is not considered active involvement. (See the Matching Grant application instructions for suggestions.)

Several members of the Mission Valley club have already made

contact with Catherine Higdon from St Jude's hospital to set up the budget. In addition The Memphis Club will visit the hospital when the equipment is in place. Members from the Mission Valley club have met with members from the Tijuana Oeste club to discuss and plan for this project.

HOST PARTNER

Explanation: The host partner is the club or district in the project country. A committee of at least **three** Rotarians must be established to oversee the project. The primary project contact must be a member of the primary club identified below. The project committee must be composed of members of the sponsor Rotary clubs for club-sponsored projects or district for district-sponsored projects. The committee members must be committed for the duration of the grant process. Please provide the primary address for all committee members, as all Rotary information will be sent to this address. It is highly recommended that the primary contact (who receives all information from TRF) have an e-mail address to expedite communication.

| Primary Club/District | | | |
|--------------------------------|---------------------|-------------|----------------------------|
| Club: Mission Valley | | | Club ID number (if known): |
| District: 5340 | | Country: US | A |
| Primary Contact: | | | |
| Name: Larry Mascari | | | Member ID: |
| Club: Mission Valley | | | |
| Rotary Position: International | Chair | | |
| Address: 3601 Helix St | | | |
| City: Spring Valley | | | |
| State/Province: Ca | Postal code: 91977 | | Country: USA |
| Email: mascari4@cox.net | | | |
| Home phone: 619-368-3553 | Office phone: 619-5 | 82-8200 | Fax: shi@castergrp.com |
| Project Contact #2: | | | |
| Name: William Ray | | Member II | D: 3453595 |
| Club: Memphis | | | |
| Rotary Position: President | | | |
| Address: 255 N. Main 3rd Flo | oor N | | |
| City: Memphis | | | |
| State/Province: Tn | Postal code: 38103 | | Country: USA |
| Email: william.ray@bellsouth | 1.com | | |
| Home phone: 901-850-0395 | Office phone: 901 | L-820-0428 | Fax: 901-820-9499 |
| Project Contact #3: | | | |
| Name: Linda Miller | | Member | ID: 5975549 |
| Club: Memphis | | | |
| Rotary Position: Project Chair | | | |
| Address: 535 Alabama | | | |
| City: Memphis | | | |
| State/Province: TN | Postal code: 38105 | | Country: USA |
| Email: linda@rmhmemphis>org | | | |
| Home phone: 901-767-2878 | Office phone: 901 | 1-312-7480 | Fax: 901-523-0315 |

INTERNATIONAL PARTNER

Explanation: The international partner is the club or district outside the project country. A committee of at least **three** Rotarians must be established to oversee the project. The primary project contact must be a member of the primary club identified below. The project committee must be composed of members of the sponsor Rotary clubs for club-sponsored projects or district for district-sponsored projects. The committee members must be committee for the duration of the grant process. Please provide the primary address for all committee members, as all Rotary information will be sent to this address. It is highly recommended that the primary contact (who receives all information from TRF) have an e-mail address to expedite communication.

| Primary Club/District | | |
|------------------------------------|---------------------------|--------------------------------------|
| Club: Oeste de Tijuana | | Club ID number (if known): 6902 |
| District: 4100 | Country: Mexic | 20 |
| Primary Contact: | | |
| Name: Miguel Vasconcelos | | Member ID: 1534461 |
| Club: Oeste de Tijuana | | |
| Rotary Position: International Cha | air | |
| Address: Blvd Fundadores 6409 B | Elrob 1 | |
| City: Tijuana | | |
| State/Province: Baja Ca | Postal code: 22180 | Country: Mexico |
| Email: vasconcelosma@hotmail.co | om | |
| Home phone: 011-52-664-637-659 | 9 Office phone: 011-52-66 | 54-628-8216 Fax: 011-52-664-637-5760 |
| Project Contact #2: | | |
| Name: Santiago santana | | Member ID: 6889 |
| Club: Oeste | | |
| Rotary Position: International Ser | rvice | |
| Address: Calle Tercera #7964 Zo | ona Centro | |
| City: Tijuana | | |
| State/Province: Baja Ca | Postal code: 22000 | Country: Mexico |
| Email: sdpapel@hotmail.com | | |
| Home phone:Office phone: | 52-664-685-0533 | Fax: 011-52-664-685-0541 |
| Project Contact #3: | | |
| Name: Sofia S Vega | | Member ID: 6420906 |
| Club: Oeste | | |
| Rotary Position: Rotary Foundation | n | |
| Address: 539 Telegraph Canyon F | Rd 919 | |
| City: Chula Vista | | |
| State/Province: Ca | Postal code: 91910 | Country: USA |
| Email: sofiasvega@yahoo.com | | |
| Home phone: 011-52-664-680-705 | 4 Office phone: 32 | 3-988-5687 Fax: 323-988-5699 |

PROJET BUDGET

Explanation: For detailed information on what TRF funds, please see *The Guide to Matching Grants* (144-EN). Offi cial RI exchange rates can be found at www.rotary.org/newsroom/downloadcenter/support/rates.html. Please use the most recent rate.

| Name of supplier | Amount |
|------------------------|------------------------|
| Shimadzu Scient. Instr | \$32,043 |
| Sole Technologies | \$8,450 |
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| | ubtotal \$40,493 |
| | Shimadzu Scient. Instr |

Exchange rate used

US\$1 =

Total in U.S. dollars

\$40,493

D-6,20

PROJECT FINANCING

Explanation: Clearly list all financing in U.S. dollars noting which funds will be contributed in cash and which will be contributed from District Designated Funds (DDF). Use of DDF must be authorized by the district Rotary Foundation committee chair. TRF matches US\$0.50 for every \$1 cash contribution and \$1 for every \$1 contribution from DDF. The primary host club or district must provide at least \$100.

NOTE: No funds should be sent to TRF prior to official Trustee approval. Upon approval, a letter will be sent to the sponsors notifying them of approval and providing detailed instructions on how and where to submit their contributions.

| Host Rotary clubs or districts Inside the project country (The primary host club or district must provide at least US\$100.) | Cash (US\$) | DDF (US\$) | DRFC Chair (Print Name) | DRFC Chair Authorization |
|---|-------------|------------|-------------------------|--------------------------|
| Rotary Club of Misaion Valley | \$11,329 | | | |
| District 5340 DDF | | \$2,000 | Marge Cole | Marge Cole |
| International Rotary clubs or districts outside the project country | Cash (US\$) | DDF (US\$) | | DRFC Chair Authorization |
| Rotary Club of Oeste de Tijuana | \$13,000 | | | |
| Subtotal, Cash and DDF | \$24,329 | \$2,000 | | |
| TOTAL Cosponsor contributions | \$26, | . 329 | | |
| Total funds requested from TRF (must be at least US\$5,000) | \$14, | 164 | 4 4 | |
| Additional outside funding (not matched by, or forwarded to, TRF) | - | - | | |
| Total project financing (must equal budget on page 4) | \$40, | 493 | | |

PROJECT PLANNING

Explanation: Before an application is submitted to TRF, project partners should discuss various planning details. The questions below are a guide to aid project planning. Note that a Rotary club/district or Rotarian may not own anything purchased with grant funds.

Identify who will own equipment and maintain, operate, and secure items purchased with grant funds. (A Rotary club or Rotarian cannot own equipment.)

St Judes Hospital

Will training in use and maintenance of technical equipment be provided? If so, who will provide training?

St Judes Hospital will arrage it

Is software necessary to operate any items? If so, has software been provided?

Indicate what arrangements have been made for customs clearance if items will be purchased and shipped from outside the project country.

N/A

Provision of plumbing and electrification to structures where people live or work cannot be purchased with grant funds and must be funded with other sources. Have the sponsor clubs/districts planned and agreed to fund plumbing or electrification for equipment and appliances in existing buildings (hospitals, schools, libraries, orphanages, etc.)?

COMPETITIVE GRANTS

Explanation: Competitive grants are grants requesting US\$25,001 or above from TRF. Additionally, all revolving loan or microcredit grants are competitive, regardless of the requested amount. Competitive grants are reviewed twice a year at the October and April Trustees' meetings.

If your grant request is for US\$25,001 or above, a community needs assessment must be included. This assessment should demonstrate how the proposed project

• Involves the benefiting community

• Is viable and will be maintained by the benefiting community after grant funds have been expended

If your project involves revolving loans or microcredit, additional information must be provided:

- Revolving Loan Fund Supplement Form
- Revolving Loan Fund Credit Group Plan

Please refer to The Guide to Matching Grants (144-EN) and the RI Web site (www.rotary.org) for additional information.

AUTHORIZATION

Explanation: Authorizations ensure that both partners are aware of, and interested in, pursuing the described project. By signing below, the current club presidents for club-sponsored projects and current district grants subcommittee chairs for district-sponsored projects, as well as the committee members, agree to the criteria listed and affirm their support of the project.

All Rotary clubs, districts, and Rotarians involved in this project are responsible to The Rotary Foundation (TRF) for the conduct of the project and its subsequent reporting. The signatures of all involved parties confirm that they understand and accept responsibility for the project. Parties may either sign this page or submit a separate letter of commitment.

By signing below, we agree to the following:

• All information contained in this application is, to the best of our knowledge, true and accurate, and we intend to implement the project as presented in this application.

• The club/district agrees to undertake this project as an activity of the club/district.

• We ensure all cash contributions (as detailed in Project Financing) will be forwarded to TRF or directly to the project account after Trustee approval of the grant.

• RI and TRF may use information contained in this application to promote the project by various means such as The Rotarian, the RI international convention, RVM: The Rotarian Video Magazine, etc.

• The partners agree to share information on best practices when asked, and TRF may provide partners' contact information to other Rotarians who may wish advice on implementing similar projects.

• To the best of my knowledge and belief, except as disclosed herewith, neither I nor any person with whom I have or had a personal or business relationship is engaged, or intends to engage, in benefiting from TRF grant funds or has any interest that may represent a potential competing or conflicting interest. A conflict of interest is defined as a situation in which a Rotarian, in relationship to an outside organization, is in a position to influence the spending of TRF grant funds, or influence decisions in ways that could lead directly or indirectly to financial gain for the Rotarian, a business colleague, or his or her family, or give improper advantage to others to the detriment of TRF. (NOTE: Any and all exceptions must be explained in an attached statement.)

| Host Partner | | International Partner | | | |
|--|----------------|--|------------------|--|--|
| Club president (club-sponsored) District grants subcommittee chair (district-sponsored) | | Club president (club-sponsored) District grants subcommittee chair (district-sponsored) | | | |
| Name | Mark Bagula | Name | Luis Torres Leal | | |
| Title | Club President | Title | Club President | | |
| Rotary Club | Mission Valley | Rotary Club | Oeste de Tijuana | | |
| District | 5340 | District | 4100 | | |
| Signature | | Signature | | | |
| Date | | Date | | | |

| Primary Contact | | Primary Contact | | | |
|--------------------|------------------------------------|-------------------------|--------------|--|--|
| Name | Larry Mascari | Name Miguel Vasconcelos | | | |
| Signature | | Signature | | | |
| Date | | Date | | | |
| Project Contact #2 | Project Contact #2 Project Contact | | #2 | | |
| Name | William Ray | Name Santiago santana | | | |
| Signature | | Signature | | | |
| Date | | Date | | | |
| Project Contact #3 | | Project Contact #3 | | | |
| Name | Linda Miller | Name | Sofia S Vega | | |
| Signature | | Signature | | | |
| Date | | Date | | | |

| 11/15/2006 10:43 9015260174 11-02-'06 13 00 FROM- | ROTARY | PAGE 03 T-797 F009 F-539 |
|--|--------|-----------------------------|
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AUTHORIZATION

Explanation: Authorizations ensure that both partners are aware of, and interacted in, pursuing the described project. By signing below, the current olub presidents for club-spansored projects and ouwant district grants subcommittee chairs for district-sponsored projects, as well as the committee members, agree to the criterie listed and affirm their support of the project

All Rotary clubs, districts, and Rotarians involved in this project are responsible to The Rolary Foundation (TRF) for the conducof the project and its subsequent reporting. The signatures of all involved parties confirm that they understand and accept responsibility for the project. Parties may either sign this page or submit a separate letter of commitment.

By signing below, we agree to the following:

· All information contained in this application is, to the best of our knowledge, true and accurate, and we intend to implement the project as presented in this explication.

. The club/district agrees to undertake this project as an activity of the club/district.

. We ensure all cash contributions (as detailed in Project Financing) will be forwarded to TRF or directly to the project account We chaute all data controlutions (as existing in Fright Intersection of promote the project by various means such as The Rotarian the Ri International convention, RVM: The Rotarian Video Magazina, etc.
 The partners agree to share information on best president when asked, and TRF may provide partners' contact information

 The partners agree to share information on pest precises when asked, and TRF may provide partners' contact information to other Rotarians who may wish advice on implementing similar projects.
 To the best of my knowledge and belief, except as disclosed herewith, neither I nor any person with whom I have or had a personal or business relationship is engaged, or intends to engage, in benefiting from TRF grant funds or has any interest that may represent a potential competing or conflicting interest. A conflict of interest is defined as a situation in which a Rotarian, in relationship to an outside organization, is in a position to influence the spending of TRF grant funds, or influence decisions in ways that could lead directly or indirectly to financial gain for the Rotarian, a business colleague, or his or her family, or give improper advantage to others to the detriment of TRF. (NOTE: Any and all exceptions must be explained in an attached explanation). statement.)

| Host Partner | | International Partner | | | |
|--|----------------|------------------------------------|------------------|--|--|
| Club president (club-sponsored) District grants subcommittee chair (district- sponsored) | | P. Club prosident (club-sponsored) | | | |
| Name | MARK BAGULA | Name | 4415 TOPRES LEAL | | |
| Title | Club President | Title | - Resident | | |
| Rotary Club | MISSION VALLEY | Rotery Club | OESTE | | |
| District | 15340 | District | A de | | |
| Signature | ht Krl | Signature | (http:// | | |
| Oate | 11/21/2006 | Date | 11/6/06 | | |
| Primery Canteet | | Primary Contact | | | |
| Name | LANTY Mascari | Name | MICULL VARCELOS | | |
| Signature | Lung Masiary | Pignatura | - Administer | | |
| Date | 11/21/2006 | Dele | 111/9/2006 | | |
| Project Contact | #2 | Project Conta | | | |
| Name | William Ray | Name | DANTIAGO SANTANA | | |
| Signature | William The | Signature | top ater | | |
| Sete | 11/14/06 | Date | 11/10/2006 | | |
| Project Contact | | Project Contact #3 | | | |
| Name | | Name | 2 ofia S. Vega | | |
| Signatura | | Signature | Sugar Alkin | | |
| | 11/14/06 | | 11/10/06 | | |

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Application Form - Project D-620

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COOPERATING ORGANIZATION

Explanation: A cooperating organization is an organization that is directly involved in the implementation of the project, offering technical expertise and project coordination. A benefiting entity is the recipient of goods or services and is not considered a cooperating organization.

If this project involves a cooperating organization (neither a Rotary club nor the beneficiary of the project), provide the following Name of organization:

| Street address: | | | |
|-----------------------|--------------|----------|--|
| City, State/Province: | Postal code: | Country: | |
| Office phone: | Fax: | | |
| Email: | Web address: | | |

In addition to the above, the following must be attached:

- · Letter of participation from cooperating organization that specifically states:
 - Its responsibilities and how it will Interact with Rotarians

- The organization's agreement to cooperate in any financial review of the project

· A letter of endorsement from the host partner confirming that the cooperating organization works within that country's laws

FINAL REPORT

Explanation: Although both partners are responsible for completing progress and fi nal reports, the Trustees require that one partner take primary responsibility for submitting the final report to TRF. It is recommended that the club or district receiving the funds should take primary responsibility.

| "By signing below, our club/district accepts primary reporting responsibility." Print name: Larry Maecari | _signature: Larry Moscari |
|--|---------------------------|
| Rotary club: Mission Valley | District: 5340 |

DISTRICT GRANTS SUBCOMMITTEE CHAIR REVIEW

Explanation: The Trustees require that the district grants subcommittee chair (DGSC) from either the host or international sponsor district certifies the application as complete. If the application is not complete or eligible, it will be returned to the host partner with a brief explanation.

"On behalf of the committee, I hereby certify that to the best of my knowledge and ability this grant application is complete, meets all TRF guidelines, and is eligible for funding."

| Print name of DGSC: | Dan Gensler | | Signature: | | |
|---------------------|-------------|--|--------------------------------|--|--|
| District: 5340 | | | Date: | | |

COOPERATING ORGANIZATION

Explanation: A cooperating organization is an organization that is directly involved in the implementation of the project, offering technical expertise and project coordination. A benefiting entity is the recipient of goods or services and is not considered a cooperating organization.

| If this project involves a cooperating | ng organization (neither a Rotary club no | or the beneficiary of the project), pro | vide the following: |
|--|---|---|---------------------|
| Name of organization; | | | noo ino ionoming, |
| Street address: | | | |
| City, State/Province: | Postal code: | Country: | |
| Office phone: | Fax: | · | |
| Email: | Web address | | - 11-1 |
| | | | |

In addition to the above, the following must be attached:

· Letter of participation from cooperating organization that specifically states:

- Its responsibilities and how It will interact with Rotarians

- The organization's agreement to cooperate in any financial review of the project

· A letter of endorsement from the host partner confirming that the cooperating organization works within that country's laws

FINAL REPORT

Explanation: Although both partners are responsible for completing progress and final reports, the Trustees require that one partner take primary responsibility for submitting the final report to TRF. It is recommended that the club or district receiving the funds should take primary responsibility.

"By signing below, our club/district accepts primary reporting responsibility."

| Print name: Larry Mascari | Signature: | |
|------------------------------------|----------------|---|
| Rotary club: <u>Mission Valley</u> | District: 5340 | _ |

DISTRICT GRANTS SUBCOMMITTEE CHAIR REVIEW

Explanation: The Trustees require that the district grants subcommittee chair (DGSC) from either the host or international sponsor district certifies the application as complete. If the application is not complete or eligible, it will be returned to the host partner with a brief explanation.

| "On behalf of the committee, " | hereby certify that to the best of my knowledge | e and ability thi | s grant application is complete. |
|--------------------------------|---|-------------------|----------------------------------|
| meets all TRF guidelines, and | is eligible for funding." | - | |
| Print name of DGSC: Dan_G | ensler | Signature: | String H Senster |
| District: 5340 | | Date: | 1 |

COMPLETION CHECKLIST

Before submitting your Matching Grants Application, please take a moment to review this checklist. If you have any questions or concerns, please contact the humanitarian Grant Coordinator for the project location.

- Does the project meet all grant policies and guidelines (see The Guide to Matching Grants [144-EN] or the RI Web site at www.rotary.org)?
- Does the project description clearly state how the project will assist those in need?
- Are the activities of the host and international partners clearly explained? Will the Rotarians be actively involved in the project?
- ✓ Have both the host and international partners created committees to oversee the project? Are these individuals correctly listed on the application with their complete contact information?
- Is a detailed, itemized budget included in the application?
- Are all partner contributions listed in the application, noting which contributions will be cash and which will be DDF?
- Has the DRFC chair provided his/her signature authorizing the use of District Designated Funds?
- Have the club presidents or district grants subcommittee chairs from the host and international partner provided their authorizing signatures?
- Have all six committee members provided their authorizing signatures?
- If a cooperating organization is involved, are the following letters included with the application:
 - Letter from the organization specifically stating its responsibilities, how it will interact with Rotarians, and agreeing to cooperate in any financial review of the project
 - Letter of endorsement from the host partner confirming that the cooperating organization is reputable and works within the laws of that country
- ☐ If the project involves a revolving loan or microcredit, is the Revolving Loan Fund Supplement and Credit Group Plan included?
- ☐ If the grant request is US\$25,001 or more, is a community needs assessment attached?
- Has the district grants subcommittee chair from either the host or international partner certified the application as complete and eligible?
- Is there a minimum of nine authorizing signatures included in the application?
- Have the partners made copies of all documents for their files prior to submitting them to TRF?



Send the completed application and all attachments to:

Humanitarian Grants Program The Rotary Foundation One Rotary Center 1560 Sherman Avenue Evanston, IL 60201-3698 USA Fax: 847-866-3698 Email: grants@rotary.org