

Date:		ne): ПStandard	П Maior	□ Emerg	encv
	District requesting grant:		-		-
					District
Project name:					
Location of project	ct:				
ATTACH impact or	on of project. able blueprints, conceptual art/dr a children statement. adel-Murphy Youth Foundation w	_			oject.
How many childr	en will benefit:	Total proje	ct cost: \$		
□Lions Club <u>or</u> □	lDistrict committed/dedicated	funds: \$			
Amount requeste	d from BMYF: \$				
<u>name</u> an	d of Directors or District Cabinet d <u>amount of committed/dedicate</u> lub/district bank statement indica	<u>d funds</u> ).			• ,
Other grants appl	ied for related to this project:				
Name:	Amount: \$ Amount: \$ rant is needed:	□Yes □No	No O		
When approved, contact listed belo	check will be made out to the	requesting club/	'district abo	ove and ma	ailed to the
Contact person in	formation:				
Name: Signature:					
Club/district-title:		Club/dist	Club/district:		
Mailing addre	SS:				
_	Street	Town/City		State	Zip
Best contact p	hone: Ema	il address:			

**Submit all information to:** 

BMYF President John Wargo, 10 Old Smith Road, Poughkeepsie, NY 12603-3816  $\emph{OR}$  via email to jwargo@yahoo.com