



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: [Tijuna](#)

City/
Village: [Tijuana](#)

State/
Province: [Mexico](#)

Country: [Mexico](#)

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.

[The purpose of the grant is to purchase medicine and medical supplies for poor families in the colonias of Tijuana who cannot afford them and sometimes go untreated.](#)

[Arrangement have been made to purchase and distribute these drugs and supplies thru a missionary hospital in the Tijuana area.](#)

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

[St. francis Hospital has been in existance for many years and this grant is to assist them in their work with the poor.](#)

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.)

[Host partner has met with the international partner in planning this grant. They will coordiante with the hospital to see that the funds are properly spent. They will visit the hospital for the awarding of the grant. The international partner will do all required paperwork required by TRF and will also visit the hospital That arranges for distribution of the medicine.](#)

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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 TIJUANA SIGLO XXI Club ID number (if known) _____
District 4100 Country MEXICO

Primary Contact

Name YESUS ANGEL BELTRAN PEÑA Member ID 3445305

Club TIJUANA SIGLO XXI

Rotary position PRESIDENTE

Address VENUSTIANO CARRANZA # 246 - E DEPTO. 03 BAY CONSTITUYENTES

City TIJUANA BAJA CALIFORNIA

State/Province BAJA CALIF. Postal code 22510 Country MEXICO

E-mail SEANBER@PRODIGY.NET.MX

Home phone 664-6238802 Office phone 664-6847122 Fax 664-6263668

Project Contact #1

Name JUAN SERMAN ANAYA VELAZQUEZ Member ID 2123689

Club TIJUANA SIGLO XXI

Rotary position SECRETARIO

Address CUMPAS # 436 FRACC. CHAPOLTEPEC

City TIJUANA

State/Province B.C. Postal code _____ Country MEXICO

E-mail _____

Home phone 621-84-85 Office phone 664-6266622 Fax _____

Project Contact #2

Name FERRNANDO ARCE ZARAGOZA Member ID 6989

Club TIJUANA SIGLO XXI

Rotary position TESORERO

Address BARRIOCAT #456 COLONIA CACHO

City TIJUANA

State/Province BAJA CALIF. Postal code _____ Country MEXICO

E-mail _____

Home phone 664-684-91-73 Office phone _____ Fax _____

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: Siglo XXI Club ID number (if known): _____

District: 4100 Country: Mexico

Primary Contact:

Name: Jesus Beltran Member ID: _____

Club: Siglo XXI

Rotary Position: President

Address: Venostiano carranza #2416-E

City: Tijuana

State/Province: Baja Ca Postal code: 22510 Country: Mexico

Email: jeanbep@prodigy.net.mx

Home phone: 011-52-664-623-8802 Office phone: 011-52-664-684-7122 Fax: 011-52-664-686-3688

Project Contact #2:

Name: Juan German Anaya Member ID: _____

Club: Siglo XXI

Rotary Position: Secretary

Address: Cumpas #436 Fracc Chapulteprc

City: Tijuana

State/Province: Baja Ca Postal code: _____ Country: Mexico

Email: none

Home phone: 011-52-664-621-8485 Office phone: 011-52-664-634-6622 Fax: none

Project Contact #3:

Name: Fernando Arge Zaragoza Member ID: _____

Club: Siglo XXI

Rotary Position: Treasurer

Address: Gatopicat #456 Colina Cacho

City: Tijuana

State/Province: Baja Ca Postal code: _____ Country: Mexico

Email: none

Home phone: 011-52-664-684-9173 Office phone: none Fax: none

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 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: Shelter Island Club ID number (if known): _____

District: 5340 Country: USA

Primary Contact:

Name: Keith Vance Member ID: _____

Club: Shelter Island

Rotary Position: Secretary

Address: 215 Church Ave

City: Chula Vista

State/Province: Ca Postal code: 91910 Country: USA

Email: keithvance@cox.net

Home phone: 619-850-1646 Office phone: 619-427-7774 Fax: 619-427-7878

Project Contact #2:

Name: Pauline Lim Member ID: _____

Club: Shelter Island

Rotary Position: Program Chair

Address: 1021 Scott St #243

City: San Diego

State/Province: Ca Postal code: 92106 Country: USA

Email: paulinelim@prusd.com

Home phone: 619-995-3663 Office phone: 619-222-0555 Fax: 619-226-6649

Project Contact #3:

Name: Brain Zimmerman Member ID: _____

Club: Shelter Island

Rotary Position: Treasurer

Address: 3160 Camino Del Rio #300

City: San Diego

State/
Province: Ca

Postal code: 92108

Country: USA

Email: bzimmerman@libertypfc.com

Home phone: 858-682-2890

Office phone: 619-326-5936

Fax: 619-326-5939

PROJET BUDGET

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

Budget item	Name of supplier	Amount
Medicine antibiotics,	Farmaceuticas Del	15,000
pain killers, insulins, etc	Noroeste, S De Rl De	
Vitamins and preventative	Cv	\$5,000
supplements		
Minor medical equipment		\$7,000
Medical supplies		\$4,000

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Subtotal

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Exchange rate used

US\$1 =

Total in U.S. dollars

\$31,000

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 Siglo XXI	\$2,000			
International Rotary clubs or districts outside the project country	Cash (US\$)	DDF (US\$)	DRFC Chair (Print Name)	DRFC Chair Authorization
Rotary Club of Shelter Island	\$16,000			
District 5340 DDF		\$2,000	Marge Cole	Marge Cole
Subtotal, Cash and DDF	\$18,000	\$2,000		
TOTAL Cosponsor contributions	\$20,000			
Total funds requested from TRF (must be at least US\$5,000)	\$11,000			
Additional outside funding (not matched by, or forwarded to, TRF)	-			
Total project financing (must equal budget on page 4)	\$31,000			

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.)

[Casa San Eugenio Dental Clinic](#)

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

[The Clinic will arrange with suppliers](#)

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

[N/A](#)

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

[All Purchased in Mexico](#)

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.)?

[N/A](#)

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.

AUTHORIZATIONS

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, *AVAT: 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	
<input type="checkbox"/> Club president (club-sponsored)		<input checked="" type="checkbox"/> Club president (club-sponsored)	
<input type="checkbox"/> District grants subcommittee chair (district-sponsored)		<input type="checkbox"/> District grants subcommittee chair (district-sponsored)	
Name		Name	
Title		Title	
Rotary Club		Rotary Club	SHELTER ISLAND
District #		District #	5340
Signature		Signature	<i>Clare Sullivan</i>
Date		Date	10/11/06
Primary Contact		Primary Contact	
Name		Name	KEITH A VANCE
Signature		Signature	<i>Keith Vance</i>
Date		Date	10/3/06
Project Contact #2		Project Contact #2	
Name		Name	PAULINE LIM
Signature		Signature	<i>Pauline Lim</i>
Date		Date	10/3/06
Project Contact #3		Project Contact #3	
Name		Name	Brian Lyman
Signature		Signature	<i>Brian Lyman</i>
Date		Date	10/2/06

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FAX NO. 619 287 2493

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DECLARATION

By signing below, the Rotarian and the club/district agree to the terms 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 described 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.
- We and TRF may use information contained in this application to promote the project by various means such as The Rotarian, the 67 International Convention, RIM, The Rotarian VideoMagazine, etc.
- The parties 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 by 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	
<input type="checkbox"/> Club president (club-sponsored)	<input type="checkbox"/> District grants subcommittee chair (district-sponsored)	<input type="checkbox"/> Club president (club-sponsored)	<input type="checkbox"/> District grants subcommittee chair (district-sponsored)
Name: JESUS A. BELTRAN P.	Name:	Name:	Name:
Title: PRESIDENT 2006-2007	Title:	Title:	Title:
Rotary Club: TUJANA 5120 KY	Rotary Club:	Rotary Club:	Rotary Club:
District: 4100	District:	District:	District:
Signature: <i>[Signature]</i>	Signature:	Signature:	Signature:
Date: 10/11/06	Date:	Date:	Date:
Primary Contact		Primary Contact	
Name: JUAN G. ARAYA V.	Name:	Name:	Name:
Signature: <i>[Signature]</i>	Signature:	Signature:	Signature:
Date: 10/11/06	Date:	Date:	Date:
Project Contact #1		Project Contact #2	
Name: FERNANDO ARCE	Name:	Name:	Name:
Signature: <i>[Signature]</i>	Signature:	Signature:	Signature:
Date: 10/11/06	Date:	Date:	Date:
Project Contact #3		Project Contact #4	
Name: JOSE ROHANO V.	Name:	Name:	Name:
Signature: <i>[Signature]</i>	Signature:	Signature:	Signature:
Date: 10/11/06	Date:	Date:	Date:

Application Form - Project D-630

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/

Postal code: _____

Country: _____

Province: _____

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 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: _____

MIKE MASCARI

Signature: _____

MJ Mascari

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: 4100

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 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 _____
 E-mail _____ 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 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.

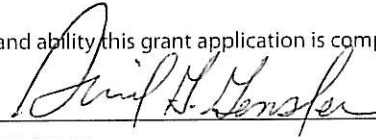
"By signing below, our club/district accepts primary reporting responsibility."

Print name _____ Signature _____
 Rotary club _____ District _____

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 Daniel Gensler Signature 
 District 5340 Date 10/17/2006

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

