



Seward Optimist Club Fund Request

Requesting Organization: _____

Amount Requested: _____

Number of Youth Served: _____

Project Description (Briefly describe how the funds will be used)

Requested by: _____ Date: _____
(Print)

Contact Information

Address: _____

Phone: _____

Email: _____

Date Approved: _____

President: _____

Treasurer: _____

***Check will be made payable to the organization listed above.
Mail completed form to Seward Optimist Club, PO Box 191, Seward, NE 68434***