



LIONS OF VIRGINIA FOUNDATION, INC.
GRANT REQUEST FOR SCREENING EQUIPMENT



LOVF DOES NOT REIMBURSE FOR MONIES ALREADY PAID OUT BY CLUBS/DISTRICTS

PLEASE SUBMIT THIS GRANT REQUEST ELECTRONICALLY OR BY MAIL TO LOVF
HUMANITARIAN GRANTS CHAIRPERSON.

DATE: _____

REQUEST: VISION SCREENING DEVICE HEARING SCREENING DEVICE OTHER

NOTE: EQUIPMENT PURCHASED WITH THE ASSISTANCE OF A LOVF GRANT MUST BE MADE AVAILABLE TO
OTHER LIONS CLUBS WHEN NOT IN USE.

LOVF WILL PAY UP TO A MAXIMUM OF 50% OF THE TOTAL COST OF HEARING AND/OR VISION SCREENING EQUIPMENT

ASSISTANCE REQUESTED: MATCHING GRANT \$ _____

MATCHING FUNDS COMING FROM: CLUB DISTRICT OTHER

CLUB/DISTRICT REQUESTING ASSISTANCE:

LIONS CLUB: _____ DISTRICT: _____

LION CONTACT PERSON'S NAME:

ADDRESS: _____

TELEPHONE: _____

EMAIL: _____

PLEASE PROVIDE OR ATTACH ANY ADDITIONAL INFORMATION TO SUPPORT YOUR GRANT REQUEST.

**PLEASE SUBMIT THIS GRANT REQUEST ELECTRONICALLY OR BY MAIL TO LOVF HUMANITARIAN
GRANTS CHAIRPERSON.**

**LOVF Humanitarian Grants Chairperson Mary Lou Newman, 3009 Heritage Landing Road, Williamsburg, VA
23185-8113. email: mlnewman0@verizon.net**

**You must also submit this LOVF Application Grant to your District Governor and
LOVF District Representative can be found on the LOVF website or [By clicking here](#)**

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