THE COMMUNITY FOUNDATION

###### Organization Information

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| Name & address of applicant organization: | Is the name at the left the same as it appears on the IRS 501(c)(3) Letter of Determination? \_\_yes \_\_no  If not, explain: | |
| Phone Number:  Fax Number:  E-mail: | For current fiscal year:  Organization’s total budgeted revenue:  Organization’s total budgeted expenses:  Fiscal year: \_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_  Revenue Sources: | |
| Chief Executive Name and Title:  9-digit Federal Employer ID #:  Year organization incorporated: | \_\_\_ % government (city, county, state,  federal)  \_\_\_ % United Way  \_\_\_ % membership | \_\_\_ % fees  \_\_\_ % grants  \_\_\_ % investment income  \_\_\_ % fundraising (e.g.  events, gifts, bequests, etc.) |

# Information for This Request

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| Name of this program or project:  Program/project contact person: | List other potential and actual sources of support - put an “\*” by those committed, noting any matching fund requirements.  Amount Funder |
| Name:  Phone Number:  Email:  Total cost of this effort:  Amount requested from this funder:  Type: |  |
| \_\_Program/Project  \_\_General Support  \_\_Other (describe) | List major funders of program/project for past two years if applicable:  Amount Funder |
| Date funds needed by:  Date by which funds will be spent: |  |