

# Grant Application Summary Form

**South Pacific County Community Foundation**  
**P.O. Box 75, Nahcotta, WA 98637**

<b>Date:</b>		<b>Please check one:</b>	New Request	Renewal Request
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<b>Organization Name</b>			
Alternate name/acronym			
Fiscal sponsor if applicable			
Mailing address			
City	State	Zipcode	
Email address	Website		
Phone #	Fax #		

<b>Executive Director or Board Chair</b>		Prefix (Mr., Ms., etc.)
First Name	Last Name	
Title	E-Mail	

<b>Mission &amp; Primary Activities</b>			
Employer ID number (EIN)	Year org. established		
Number of paid employees	FTE	Number of volunteers	
Number of board members	Number of board members who contribute to annual budget	Number of board meetings per year	

<b>Organization Financial Information</b>	Organization budget for <b>current year</b>		
	Organization expenditure total for <b>last year</b>		
	Organization revenue total for <b>last year</b>		
Revenue breakdown for last year	Memberships		Which calendar or fiscal year do these (last year) figures represent?
	Individual contributions		
	Earned income (ticket sales, fees for service, etc.)		
	Fundraising benefits		
	Corporate/business contributions		
	Government support		
	Foundation support		
	Endowment earnings		
Other (identify sources):			
Organization's unrestricted cash reserves at beginning of <b>current year</b>			

From last year's revenue sources, please list the five single largest contributors and amounts provided. Contributors include specific individuals, agencies, businesses, foundations, or other groups. Individuals may be listed as Anonymous #1, #2, etc. if necessary.

<b>Project Contact Person</b>		Prefix (Mr., Ms., etc.)	
Name		Title	
Phone		E-mail	
<b>Project Description</b> (one sentence)			
<b>Key Project Components</b> (a snapshot of your project, including population to be served and measurable outcomes)			
How many persons will benefit directly from the project?			
<b>Project Budget</b>	Total project budget		Total requested

With my signature I certify the following: (1) The above information is correct; (2) I am authorized by the governing board of this organization to submit this grant application to South Pacific County Community Foundation; (3) this organization is in good standing with the IRS, retains its 501(c)(3) taxexempt status, and is further classified as a public charity and *not* a private foundation; (4) this organization does not discriminate on the basis of race, color, religion, gender, gender identity or expression, sexual orientation, physical circumstances, age, status as a veteran, or national origin.

_____	_____
Name (printed) of head of organization	Title
_____	_____
Signature of head of organization (director or board chair)	Date

**Required: TWO (2) complete packages (unstapled, unbound, printed two-sided) that include:**  
 Application summary form (one page, two-sided)  
 Detailed project narrative form (no more than four pages, 11-point font)  
 Detailed project budget, including revenues and expenditures (one page)