

Application for Grant



Name of Organization and contact person:

Street Address / City / State / Zip Code:

Phone Number:

Email:

Is your organization Non-Profit? Yes ____ No ____

Is your organization 501(c)(3)? Yes ____ No ____

Please provide copy of notice of IRS of your status:

EIN:

Does your organization serve low and moderate income citizens? Yes ____ No ____.

If so, explain:

How many clients or recipients does your organization serve annually?

Are they all in Lincoln County? Yes ____ No ____

If not, where are they located?

Please give a brief history of and purpose of your organization. (Attach documents and/or fill in the information for each question)

History and Purpose:

Mission:

please note - only complete applications with supporting documents are considered

Funding and Operations:

What means of support does your organization use?

Does your organization receive any government or tax support? (Please provide your organization's most recent annual Balance Sheet and Profit/Loss Statement)

How would funds be used if they were received from this event?

Please list your Professional Staff and Board of Directors if applicable.

How would your organization recognize Grape and Sizzle, Inc. if selected as a recipient:

please note - only complete applications with supporting documents are considered