

San Marino Community Church Foundation Grant Application 2010

GENERAL INFORMATION:

Name of Organization _____

Address _____ City _____ State _____ Zip _____

Telephone # _____ Fax # _____ Web Site address _____

Name of Chief Executive, title _____ email address _____

Name of person submitting request and title _____

IRS Classification: _____ 501 (c) 3 _____ Other (specify) _____

BOARD OF DIRECTORS INFORMATION:

of Board Members _____

of Board Meetings Held in Past Fiscal Year _____

Average # of Board members present at Board meetings _____

of Board Members making Financial Contributions during Past Fiscal Year _____

ORGANIZATION INFORMATION:

Organization's Mission & Current Services (include # served and # of staff):

Identify Organization's Goals for the next Two Years:

GRANT REQUEST:

Describe the Project and what the grant funds would be used towards:

Who will be served or benefit from this Project?

Timing of the Project (start date, completion date, etc.):

Total Budget for the Project \$ _____

Total Amount Requested \$ _____

How will the remaining funds be raised (if needed):

ORGANIZATION'S FINANCIAL INFORMATION:

Organization's Annual Budget (Attach Copy) _____

What is your Fiscal Year? From _____ to _____

How often is organization's Financial Statements Audited and by whom?

REQUIRED ATTACHMENTS:

IRS 501 (c) 3 Tax-exempt Letter

List of Board of Directors

Project Budget for Grant Proposal

Budget for Current Fiscal Year

Audited Financial Statements for Last Fiscal Year

Formed Filled out by _____ Date _____

Please return form to:

San Marino Community Church
1750 Mission Street, San Marino, CA 91108
Phone: 626/282-4181 Fax: 626/282-4185
Email: Foundation@smccpby.com