

**THE COMMUNITY FOUNDATION OF RANDOLPH COUNTY, INC.
GOODRICH BANDSHELL FUND
GRANT APPLICATION COVER**

Name of Organization _____

Contact Person _____ Title _____

Address _____ City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

EIN Number _____

Signature and Title of Authorized Officer _____

PROJECT TITLE _____ AMOUNT REQUESTED \$ _____
 PROJECT BEG. DATE _____ PROJECT END. DATE _____
 BRIEF SUMMARY OF PROJECT/REQUEST:

*PLEASE SUBMIT ONE ORIGINAL AND 10 COPIES OF THE COMPLETE PACKET
SEE LIST BELOW FOR ITEMS THAT SHOULD BE IN PACKET*

FOR OFFICE USE ONLY

APPROVED/DECLINED _____

DATE RECEIVED _____

DATE _____

PROPOSAL # _____

AMOUNT _____

CATEGORY _____

FINAL REPORT DATE _____

APPLICATION PACKET CHECKLIST:

- ____ Original and 10 copies of Grant Application and Cove Sheet
- ____ 10 copies Project budget
- ____ Copy of IRS Determination 501 (c)(3) letter
- ____ List of organization's/agency's officers or governing body
- ____ Pertinent supporting information

GRANT CONDITIONS: