

GRIFFIN FAMILY FOUNDATION, INC.
ANNA MARGARET GRIFFIN, FOUNDER

100 North Jefferson
Mexico, Missouri 65265

Telephone: 573-581-5280

DIRECTORS:
RUTH KENT
VIRGINIA PEHLE
MELODY FARNEN
BEN STEINMAN
DAN K. ERDEL

GRANT APPLICATION

Organization Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Website: _____

Contact Person: _____ Title: _____

Phone No.: _____ Email: _____

Director of the program: _____

Phone No.: _____ Email: _____

Total Agency Budget: _____ Program Budget: _____

Amount Requested: _____

Project Title: _____ Project Start Date: _____

Is this a new program for your organization? Yes No

For entire organization:

Fund raising costs: \$ _____ % _____ of operating budget

Administrative costs: \$ _____ % _____ of operating budget

Projected next year's operating budget for entire organization: \$ _____

Fund raising costs: \$ _____ % _____

Date on which fiscal year begins: _____ Date Incorporated: _____

Type of request:

- General support
- Start-up costs
- Other: _____
- Project support
- Technical assistance
- Endowment
- Capital Expenditures

Principal source of support:

- _____ % United Way
- _____ % Government contracts
- _____ % Foundations/corporations
- _____ % Earned Income
- _____ % Individual contributions
- _____ % Other: _____

Have you previously received funding from the Griffin Family Foundation, Inc.? Yes No

Purpose of request: (The summary should not exceed the space provided) _____

Why is this program unique? Why is it needed? _____

Summarize the organization's history, mission and goals: _____

List any other organizations in the area with a purpose similar to your organization and describe collaboration, if appropriate: _____

Describe what changes will occur as a result of your program: _____

Funding sources and amounts applied for, received or committed: _____

How will you know this project succeeded at the end of this grant? (list three goals, measurable if applicable, for the project) _____

Please enclose the following information with this application:

- A complete budget for the project or program;
- The current annual operating budget of your organization; include in-kind services and volunteers' hours contributed;
- Current Board of Directors, listing business addresses and occupations;
- Current audited financial report; and,
- Brochures, additional information regarding your organization.

The Foundation considers grant applications only from public charities as defined under the Internal Revenue Code and application regulations. An applicant must have obtained a 501(c)(3) determination letter prior to submitting an application and must include a copy with this application. If the applicant is not required to have obtained a 501(c)(3) letter, it must provide a copy of an IRS letter or a legal opinion certifying that the applicant is a public charity as described in section 509(a) (1), (2) or (3).

Please **mail** all grant requests to:

Griffin Family Foundation, Inc.
ATTN: Dan K. Erdel
100 N. Jefferson
Mexico, Missouri 65265

Thank you for your request.

Griffin Family Foundation, Inc.
Board of Directors