



2009 Carlton's Walk in the Park - Donation Request Form

Please return form to CWiP, PO Box #99, Carlton, OR 97111 with postmark on or before September 2, 2008. Please type or write legibly in the spaces provided; extra page for additional information may be added as needed.

Organization: _____

Mission Statement or Purpose: _____

What is your Organization's total operating budget: \$ _____

What are your Organization's current funding sources? _____

Please provide a brief description of the project / program for which you are requesting funding, and a brief timeline for implementation: _____

If this is a new project, or an ongoing program? If ongoing, please explain how it has been funded: _____

Please estimate the number of people in Carlton and Yamhill that will be served by the proposed program, and explain how you arrived at this number: _____

Describe other support you have for this program (support is identified as additional funding or donations, volunteer hours, use of buildings, etc.): _____

Please provide names and contact information for the people responsible for oversight and implementation of the proposed project:

<u>Name</u>	<u>Phone</u>	<u>Email:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Does your organization have non-profit 501c3 status? YES _____ NO _____

If so, please provide the federal ID number: _____

Do you have published organizational by-laws? YES _____ NO _____

Do you hold regular meetings that are open to the public? YES _____ NO _____

Are meeting minutes / records on file and available for review? YES _____ NO _____

Name / Signature of Person submitting this application

Contact Phone

