

COMMUNITY GRANT APPLICATION
Ukiah Natural Foods Non-Profit Community Organization Grant

Organization: _____ Date: _____

Address: _____

Phone No.: _____ E-Mail: _____

Contact Person: _____

Title of Contact Person: _____

Fiscal Agent (if using one): _____

(Please attach a copy of the 501(c)3 letter of your organization or fiscal agent organization)

Project Title: _____

Project Location: _____

Summary Description of what your organization does/and or the services it provides:

Amount requested: _____

In a separate, attached document, please provide the requested information below:

1. Please describe the project or activity for which you are requesting funding.
2. Outline your proposed project/activity budget. Specify revenues, by source, as well as expenditures, by type. (Note: No more than 10% of requested amount can be used for overhead costs.)
3. Describe the current sources of your organization's funding.
4. Outline your project/activity timeline.

Please return this completed application by Feb. 21, 2012 to:

Ukiah Natural Foods
Attn.: Nehemiah Bear
721 S. State St.
Ukiah, CA 95482

Signature of Contact Person: _____ Date: _____