

Decatur County Community Foundation
P.O. Box 278, Leon, IA 50144
Grant Application

1. <u>APPLICANT</u> requesting funding:	
Applicant Address:	Contact Person:
	Phone:
	Email:
2. Federal Tax ID # of Applicant	
3. <u>FISCAL SPONSOR</u> (if applicant is not a 501(c)3 from above):	
Fiscal Sponsor Address:	Contact person:
	Phone:
	Email:
	Federal Tax ID #:
4. Project Title:	
5. Description of Project: (please attach a budget, estimate, and photos with your application)	
6. Cost of Project:	
a. Amount of grant request: \$	
b. Amount provided by others: \$	
c. Amount provided by applicant b+c must be at least 25% of the budget: \$	
d. Total Cost of Project: \$	
(sum of lines a,b and c must equal line d)	
7. Type of Request: (check one)	
<input type="checkbox"/> Capital Project (building improvements, structures, equipment, computers, etc.)	
<input type="checkbox"/> Program Based Project (activities, services, education, non-durable goods)	
8. Project Focus: (check one)	
<input type="checkbox"/> Arts/Culture/Humanities	<input type="checkbox"/> Health or Human Services
<input type="checkbox"/> Community Improvement	<input type="checkbox"/> Youth Development
	<input type="checkbox"/> Education
	<input type="checkbox"/> Recreation or Environment
9. Anticipated completion date of Project:	
Signature:	Date:

Application must be postmarked by **March 15**
Please attach a budget, estimate, and photos
Mail 7 complete copies of your application to:
Decatur County Community Foundation
P.O. Box 278
Leon, IA 50144