

SPRING RUN CHARITABLE FOUNDATION GRANT APPLICATION

Please complete the following questionnaire and mail to:

Mr. Jack Chadwick
SRCF
9501 Spring Run Blvd.
Estero, FL 34135

If you need to add more detail, please complete on additional paper. Attach any additional information you think we might be interested in reading.

Name of Organization:

Mission Statement:

Who are the Beneficiaries?

Leadership:

Board of Trustees/Board of Directors. Please list members with phone numbers.

Who runs the day-to-day operations?

Current Sources of Funding

Amount Requested and Proposed Use of Funds:

Financial:

Please provide your most recent financial statements. Are they audited?
Name, Title and Signature of Person Preparing and Submitting this Application.

Name (printed) _____

Signature _____

Title _____ Date _____