



**Fraternal Order of Eagles
Charity Foundation
1623 Gateway Circle S
Grove City, OH 43123**



State/Provincial President's Fund Grant Request Form

☐ Research

☐ Educational Materials

☐ Equipment/Supplies

Proof of Exemption: **FEIN**

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OR Canadian Registration _____

Department/Site: _____ Fund Balance \$ _____

Address: _____ City: _____

State/Prov. _____ Zip: _____ Contact: _____ Phone: _____

Email address for organization's contact: _____

Check Payable to: _____

☐ Aerie ☐ Auxiliary Presidential Year _____ - _____ State/Province _____ # _____

President's name _____

Presentation Date (checks must be cashed within 90 days of issue date):

Secretary's Signature: _____ **Date:** _____

President's Signature: _____ **Date:** _____

Submission Checklist:

- | | |
|---|---|
| <input type="checkbox"/> Grant Form Completed in Full
<input type="checkbox"/> Grant Form Signed and Dated
<input type="checkbox"/> Contribution Enclosed | <input type="checkbox"/> Proof of Exemption – 501(c)(3) IRS Determination Letter or statement of government exemption or Canadian Charitable Registration number
<input type="checkbox"/> Project resumé on recipient's letterhead detailing use of funds within grant guidelines and affirming no administrative use of funds |
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