

Application for Funding

Name of Organization:		
Address:		
	State: Zip:	
Contact Name:	Phone:	
E-Mail Address:		
	Annual Budget:	
Non Profit: YesNo	Amount of Funding Requested \$:	
Funding Purpose: (Administrative Cos	sts and Salaries will not be approved)	
	es:	
News of CEO and/on Providents		
List all Board Members:		
Comments:		

After completing this form you must attach your Articles of Organization and Certificate of Good Standing. Mail to: 901 Main Street, Cañon City, CO 81212 ATTN: Dan Brown, President Fremont Community Foundation