



TIPP CITY FOUNDATION GRANT APPLICATION

Organization Name: _____

Address: _____

Contact Person: _____ Title: _____

Telephone: _____ Email Address: _____

Your organization must be tax/exempt under Section 501 (c)(3) of the Internal Revenue Code. Please provide a copy of your IRS Tax Determination Letter—501(c)(3) designation—if you are a first-time applicant to the Foundation.

Federal Id # _____

Project Title: _____

Amount Requested: _____ Total Project Budget: _____

Other sources contacted for support for this project and amount requested:

Duration of Project: _____

PROJECT SUMMARY: Please attach a cover letter and separate information summarizing your proposal. Include brief, but specific, information about the organization and project.

Signature of Chief Executive Officer/Authorized Official

Date

Please submit original application to:

Tipp City Foundation

PO Box 626 Tipp City OH, 45371

or email application to info@tippfoundation.org

Questions may be directed to Jim Ranft, Distribution Committee Chairman at 667-1270 or email at info@tippfoundation.org