



**What service does your organization provide to Pine City?**


**Will these funds directly benefit the residents or businesses in Pine City?**  Yes  No

**Describe the benefit and how many will benefit?** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**What are the ages of the people benefitting?** \_\_\_\_\_

**Proposed Budget for** \_\_\_\_\_  
(year of request)

**List your organization's expenses:**

Salaries-Wages	
Items to be purchased	
Other	
Total Expenses Requested	

**Please list your organization's revenues:**

Cash sources	
Other Grant sources or donations	
Earned Income (fees, ticket sales, etc.)	
In Kind Contributions	
Total Revenue	

**Date funds are needed:** \_\_\_\_\_

**Please include the following items with your request:**

1. Confirmation/certification of the organizations non-profit tax status under existing Internal Revenue Service regulations.
2. A list of officers of the organization.
3. Copies of your past two years' budgets.

Signature of person making request: \_\_\_\_\_

Title of person (if applicable): \_\_\_\_\_

Please include any letters of recommendation and support for your organization.