

Vandalia-Butler Foundation

info@vandalia-butlerfoundation.org www.vandalia-butlerfoundation.org

GRANT APPLICATION TO THE VANDALIA-BUTLER FOUNDATION

Please complete the following: Organization name Street Address _____ City, State and Zip Code______ Telephone (____)_____ Alternate Telephone (____)_____Fax (____)_____ E-Mail______ Web-Site: http://www._____ Contact person: Contact Person Title______Telephone (___)____ Alternate Contact Person: _____ Alternate Contact Person Title:______Telephone (___)____ Is your organization recognized as tax-exempt under Section 501(c) (3) of the Internal Revenue Code? Yes___ No___ If no, please explain:______ Project Title Amount requested______ Total project budget______ Duration of project _____ Project Summary: Please summarize your proposal in the space provided. Include brief, but specific, Information about the who, what, when, where, why and how of your project.



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Project Summary (continue):	
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Date Signature of board chair (required)		
Print name and title		
Please email your completed application to:	info@vandalia-butlerfoundation.org	
Or mail your completed applications:	Vandalia-Butler Foundation P.O. Box 722 Vandalia, OH 45377	