**Portland Community Fund Association**

**Request for Funding Support**

**(Distribution March 2024)**

**(This form must be received by January 10, 2024)**

**INFORMATION ABOUT THE ORGANIZATION:**

 Name of Organization:

 Address:

 Website:

 Purpose of Organization:

**The organization is: (Please check one)**

\_\_\_ Non Profit \_\_\_ 501(3c)

 \_\_\_ Public Funds \_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Are you a Tax Exempt Entity? \_\_\_Yes \_\_No

**The Board Members are:**

 **Name Title**

Please attach list if more room is needed

**ORGANIZATION CONTACT INFORMATION:**

 Contact Person: \_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Phone Number of Contact Person:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address of Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Contact: \_\_\_Text \_\_\_Email \_\_Phone

**ORGANIZATION FINANCIAL INFORMATION**: Please send a copy of one of the following with this application

Annual Financial Statement (Balance Sheet and Income Statement)

Annual Tax Return

*Your Annual Budget (in Dollars) $*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Administrative Cost (Include Salaries and Marketing*) $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Funding Needs:**

*Name of Organization*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please tell us the number of people in the Portland School District that are impacted by your organization:*

*How much is your organization asking for?* $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*What will your organization use these funds for? (Please be as specific as possible - if you have documents related to the specific project/need, please feel free to include a copy as an attachment).*

**If you received funds from us last year - please tell us how those funds were used: (please be as specific as possible).**

*Amount Received:* $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *How were these funds utilized? What was the impact of this work?*

*Were any matching funds utilized to accomplished the outcomes listed above? If yes, how much and what was the source of these funds?*

**If you receive funding in 2024, you will need to provide documentation/explanation of their use when applying in 2025. Please plan for this.**

**Whats Next:**

Mail application along with your Financial Statement or Tax Return to:

 Portland Community Fund Association PO Box 524

 Portland, MI 48875

**OR**

Email your application and required attachments to: **pcfgrants.allocations@gmail.com**

**For questions contact:**  Annette Schneider  517-282-4579

Additional Committee Members are:

              Lisa Balderson

              Julie Chapin

              Karen Hoffman

**WE MUST RECEIVE THIS INFORMATION BY January 10, 2024 IN ORDER TO BE CONSIDERED FOR FUNDING.**

**PLEASE NOTE: Incomplete applications will not be reviewed.**

**NEW FOR 2024: Applicants are invited to make a short 5 minute presentation about their application and answer questions about the funding request by attending a meeting on Thursday, January 25 at 6:00 p.m. at the Portland Senior Center. Attendance is strongly encouraged but organizations that cannot attend will still be considered for funding. Times will be assigned for presentations after January 10, 2024.**

**In addition, successful applicants will be asked to attend a meeting at 6:00 p.m. on Thursday, March 14 to pick up their check and have a photo taken for publicity purposes. Those who cannot pick up the check in person will have checks mailed no later than March 24, 2024.**