

Newnan Kiwanis Club, Inc.

Post Office Box 313
Newnan, Georgia 30264

Application for Funding Consideration
Deadline for Submitting Application -- **August 30**

Date of Application:

Complete entire application and attach following information:

- *Current FINANCIAL statement & detailed BUDGET for the coming year
- *Schedule for volunteering at fair (not required for new applicants)

NOTE:

**Application and Attachments must be MAILED to address at top of page
(WITHOUT ALL REQUESTED INFORMATION YOUR APPLICATION WILL NOT BE CONSIDERED)**

Name of Organization: _____

Address: _____

E-Mail Address: _____

Name/Title of Representative: _____

Phone #: _____

Federal Identification Number (EIN #): _____

Do you have 501(c)3 status? _____

What is the mission of your organization? _____

How would funds from the Newnan Kiwanis Club be spent? _____

Impact Statement: (If you received funds in the previous year, complete questions below)

Detail how the funds were used:

Number of people impacted by these funds:

Briefly detail impact as a result of these funds:

How much is your organization requesting from the Newnan Kiwanis Club?

\$

Please provide the following information from your current operations:

Total current operations budget:

\$

of paid employees:

Total annual salary expense:

\$

of volunteers utilized:

Percent of total budget allocated to salaries:

%

of patrons served: