

Newnan Kiwanis Club, Inc.

PO Box 313

Newnan, GA 30264

Application for Funding Consideration (MUST BE RECEIVED BY AUGUST 31)

NOTE: Please complete this entire application and attach the following information:

*Current FINANCIAL Statement and detailed BUDGET for the coming year

*Schedule for volunteering at the fair (not required for new applicants)

***MAIL APPLICATION AND ALL REQUESTED INFORMATION** to above address **(no emails please)**

*Without all requested information your application will not be considered

DATE OF APPLICATION FOR FUNDING:

Name of Organization:	
Address:	
E-Mail Address and Phone Number:	
Name/Title of Representative:	
Federal Tax ID Number (EID#):	Do you have 501c3 status?
Mission of The Organization:	
Explain how funds from the Newnan Kiwanis Club would be spent?	

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 Expenses:

of volunteers utilized:

Percent of total Budget Allocated to Salaries:

of patrons served:

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

- How were the funds used, and how many people were impacted by these funds
- What was the impact as a result of these funds