HOLY SPIRIT EPISCOPAL CHURCH – GRANT REQUEST FORM (Fillable Template)
Agency Name:
Phone:
Contact Person:
Address:
City:
State:
ZIP:
Email:
1. Paguast for Calandar Vaar
1. Request for Calendar Year:
Amount Requested: \$
2. Mission Statement of Your Organization/Agency:
3. Primary Geographic Area(s) Served:
4. United Way Funding Received (if any):
Amount: \$
Other Funding Sources & Amounts:
5. Date Agency Was Established:
6. IRS Non-Profit Status Established?   Yes  No
7. Number of Individuals Served Annually:
8. Board Information:
Number of Members:
Number Who Donate Time or Money:
9. Total Reserves: \$
10. Funds Sent to State/National Headquarters? ☐ Yes ☐ No
If yes, explain:
11. Paid Staff:
• Part-Time:
• Full-Time:
• Total Payroll: \$
12. Volunteer Corps Size:
13. Total Volunteer Hours Per Year:
14. New Initiatives in the Past Year:
15. Intended Use of Grant Funds:

16. Es	timated Grant Allocation	on by Region (%):
•	Baldwin County, AL:	%

- South Baldwin County: \_\_\_\_\_\_%
- Gulf Shores/Orange Beach: \_\_\_\_\_\_%

## Required Attachments:

- ullet Receipts and expenses for most recent fiscal year
- $\square$  Most recently audited financial statement
- ☐ IRS 501(c)(3) tax-exempt status documentation

Additional	<b>Documents</b>	Included:
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Please contact Bev Liebenow by email (<a href="mailto:holyspiritthriftstore@gmail.com">holyspiritthriftstore@gmail.com</a>) to address any questions or submit your completed form with attachments. Please note: Your grant application will be reviewed and considered by the Holy Spirit Thrift Shop Committee at our upcoming 2025 meetings scheduled for January 6, April 28, July 28, and October 27.