

Date of application: \_\_\_\_\_

# Junior Service League of St. Augustine Annual Giving Request Form

*Annual Giving is decided by the Junior Service League Executive Board at the end of each calendar year. Applications are accepted each year until December 1st.*

## Organization Information

\_\_\_\_\_  
Name of organization Legal name, if different

\_\_\_\_\_  
Address City State Zip

\_\_\_\_\_  
Phone Web site address

\_\_\_\_\_  
Name of contact Title Phone Email

\_\_\_\_\_  
Name of board chair, president, or residing officer Title Phone Email

## Proposal Information

Please construct a 3-4 sentence summary of the request:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Funds are being requested for (check the one or more that best fits your program or project):

- General
- Operating support
- Start-up costs
- Capital
- Program/project support
- Technical assistance
- Other (please specify) \_\_\_\_\_

Project dates: \_\_\_\_\_ Fiscal year end: \_\_\_\_\_

## Budget

Dollar amount requested: \$ \_\_\_\_\_

Total program or project budget (copy attached) \$ \_\_\_\_\_

## Authorization

Name of the board chair, president, or presiding officer: \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_