



GREYSTONE POWER FOUNDATION, INC.

P.O. Box 897, Douglasville, Georgia 30133

(770) 370-2080 Fax (770) 942-6053

Contact: Betsy Osborn

betsy.osborn@greystonepower.com

APPLICATION FOR DONATION FOR ORGANIZATION/AGENCY

All information requested must be completed for application to be reviewed.

1. Name of Organization: _____

2. Address: _____

Street

City or Town

State

Zip Code

3. Phone Number: _____

Work

Cell

4. Contact Person: _____

Name

Title

5. Is organization requesting funding exempt from payment of income tax? Yes _____ No _____
If yes, a copy of letter (Form 501[c]3) from Internal Revenue Service must be attached.

6. A copy of financial statement(s) for most previous year should be provided.

a. Statement attached: _____

7. Number of individuals, families or groups served in Bartow, Carroll, Cobb, Coweta, Douglas, Fayette, South Fulton and Paulding counties last year: _____

8. Does agency serve outside of Bartow, Carroll, Cobb, Coweta, Douglas, Fayette, South Fulton and Paulding counties? Yes _____ No _____

If yes, please provide information on number served and location.

JÈ State purpose of Organization/Agency Request (include amount requested and specifics of how funds will be used):

FÈ List other sources of funding for use of request as described in the above:

FFÈ How are agency's programs measured for effectiveness?

12. Please list three references.

First Reference:

Name			Phone
<hr/>			
Address	City	State	Zip Code

Second Reference:

Name			Phone
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Address	City	State	Zip Code

Third Reference:

Name			Phone
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Address	City	State	Zip Code

The information contained in this statement is for the purpose of obtaining funding from GreyStone Power Foundation, Inc. on behalf of the undersigned. Each undersigned understands that the information provided therein is used in deciding to grant funding, and each undersigned represents and warrants that the information provided is true and complete and GreyStone Power Foundation, Inc. may consider this statement as continuing to be true and correct until a written notice of a change is provided. GreyStone Power Foundation, Inc. is authorized to make all inquiries they deem necessary to verify the accuracy of the statement made herein.

NAME OF ORGANIZATION

SIGNATURE OF REPRESENTATIVE

DATE