

UNITED WAY OF DAVIESS COUNTY
FUNDING INFORMATION 2022-2023

AGENCY: _____

Mailing Address: _____

City, State, Zip: _____

Contact Person: _____

Telephone: _____

Email: _____

Person Completing this form: _____

Geographic area covered by this grant request: _____

Requested amount: _____

Do you work in collaboration with other agencies? Please name:

NAME _____

Did you share client's "stories" through media sources and recognize UWDC as the funder?

How so?

Check list:

- ___ A cover sheet with your name, address and contact information
- ___ Completed application
- ___ 990 (If not on Guide Star)
- ___ Audit or financial review (If smaller agency, an internal operational budget may be considered)
- ___ Current Board list, by-laws, mission statement
- ___ Anti-Terrorism Compliance Measures
- ___ End of Year Funding Report and Questionnaire
- ___ Annual Report of your agency and programs (or letter including your updates and accomplishments)
- ___ Your complete proposal and all materials requested above!