THE WILLIAM B. O'ROURKE FOUNDATION

GRANT APPLICATION

Name of Applicant: _____

Applicant is a ☐ Non-Profit Corporation ☐ Other _____

Tax Status of Applicant ☐ §501(c)(3) ☐ Other _____

If Applicant is a §501(c)(3) entity, are you considered "publicly supported" by the IRS? ☐ Yes ☐ No

Contact Person: _____ Phone: ( ) _____

Grant Request: $_____ ☐ General Support ☐ Project Support

Summary of Proposed Use of Grant Funds: _____

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VERIFICATION

The undersigned, a duly authorized representative of Applicant, hereby verifies that all information and documentation submitted with this Grant Application is accurate.

_____ _____

Signature Date

_____

Title

Rev. 05-2005