

# Eureka Area Community Foundation Grant Request Application

Organization/Person name and address

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Tax Identification Number: \_\_\_\_\_ IRS 501-c-3 designation Yes \_\_\_\_ No \_\_\_\_

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

Amount of Funds Requested: \$ \_\_\_\_\_

Purpose of Requested Funds (Please feel free to answer with additional sheets if needed and include specific details as to how the grant funds will be used)

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I have read, understand and attest that all information herein is true and complete to the best of my knowledge. I understand that a written follow-up is required, and I will submit a report following the completion of this project.

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

Deadline for returning applications is Monday, January 16, 2018. Return completed application to:

Eureka Area Community Foundation  
% Susan Lutz  
32260 102<sup>nd</sup> St.  
Eureka, SD 57437

If the Board of Directors approves grant funds toward your project and/or entity – you will be required to provide a follow-up summary on how these funds have been or are being used with your project.