

City of Dana Point Charitable Grant Application 33282 Golden Lantern, Dana Point, CA 92629

949.248.3505

The state of the s	Date:
Name of Organization:	
Contact Person:	
Mailing Address:	
Email:	Web site:
Amount requested: \$	Date Funding Needed:
, .	funds from other sources for this project/event? st sources and attach a separate sheet if necessary)
Has your organization applied for Yes No	or a City of Dana Point charitable grant in this Fiscal Year?
Project/Event Start Date:	
9	Organizational Information
Nature of the Organization:	
Geographic area(s) served:	
Year founded:	Number of paid staff:
Number of volunteers:	Volunteer hours contributed in past year:
Is this Organization incorporated Yes No	d in California as a non-profit organization?
If yes, date of incorporation as a	non-profit:
Federal Identification Number:	

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State Identification	ı Number [.]		

Attach a copy of your Internal Revenue Service Tax-Exemption Determination Letter.

Attach a copy of your organization's signed tax filing from last year.

Attach copies of your organization's Treasurer's Reports or financial statements for the last three years (preferably). These statements must include detailed financial information for grants, sponsorships, contributors, fundraising and expenditures.

Briefly describe the goals and objectives of your organization and the major community services it provides (Mission Statement and/or Business Plan):

For Internal Use Onl	y	
Organizations Required Financial Information	Included	Not Included
State Identification Number		
Tax-Exemption Letter (Copy)		
Organization's Last Year's Signed Tax Filing (Copy)		
Last Three Year's Treasurer's Reports		
(Including Grants, Sponsorships, Contributors, Fundraising, and Expenditures)		
Mission Statement and/or Business Plan		

PROJECT OR EVENT NEEDING CHARITABLE FUNDING:

Please provide the following pertinent information pertaining to the project or event:

- The service or project's objectives
- Number of persons served
- Area where services are provided
- Number of your volunteers involved

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Please provide an **Itemized Budget** describing how the money for this event/project will be used by your organization. Be specific about your event/project. Note any equipment or services that award money would purchase and why it is needed. Include a schedule of significant activities related to this service or project. Attach a maximum of one double-spaced type written page of information if you need to expand your answer beyond this space.

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Does this project directly affect Dana Point residents? Yes No

If yes, please explain to what extent this project or event affects Dana Point residents specifically:

For Internal Use Only	y	
Required Project or Event Information	Included	Not Included
Service or Project's Objectives		
Number of Persons Served		
Area Where Services Are Provided		
Number of Volunteers Involved		
Itemized Budget for Project/Event		
Impact on Dana Point Residents		

Dana Point, CA 92629

This application has been authorized by the Organization's:

Executive Committee: Board of Directors: Members-at-large:

We hereby certify that the information contained in this application is true to the best of our knowledge and belief. The financial information requested above has been included in our grant application submittal.

(If same person, sign both)

Print Name of individual preparing fo	rm: Title & Date
Signature of individual preparing form	n: Title & Date
Print Name of Authorized Agent/Office	cer: Title & Date
Signature of Authorized Agent/Office	r: Title & Date
Name of Organization:	
Address: City, State, Zip	
Telephone	Email
Web site address:	
11	ded from the City's official website at this form may be obtained in the City Clerk's Office.
Return completed application to:	
City of Dana Point Attention: City Clerk 33282 Golden Lantern	Phone: (949) 248-3505 Fax: (949) 248-9920 www.danapoint.org