



P.O. Box 537, Elkhart Lake, WI 53020  
920-226-0903  
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## Form for Grant Funding for Local Organizations

**Today's Date:**

**Name of Company or Organization:**

**Address:**

**Contact Name on Application:**

**Phone:**

**Email:**

**Short Answer Questions (Please attach to your application):**

- 1. What is your organization's mission / purpose?**
- 2. What impact has your organization had on the community so far?**
- 3. How is your organization looking to grow?**
- 4. What are the major financial needs for your business/organization?**
- 5. How will your business/organization allocate these funds? (Include a Business Plan/Budget)**
- 6. What separates your business/organization from other applicants applying for funding?**
- 7. Total (dollar) amount of funding requested:**

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Is your organization a 501(c)(3)? (Select one): YES / NO

**Please attach the following documents:**

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1. Financial Balance/Accounting Sheets/Budget for your business/organization\*
  2. For Charities: Copy of your 501(c)(3) letter from the IRS
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*\*Accepted/desired formats for Financial Balance/Accounting Sheets: balance sheets from QuickBooks, copy of IRS Form 990, State of Wisconsin Tax Forms 1946, State of Wisconsin Tax Forms 1952, compilation from an accountant, paperwork from an audit.*

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**Application Checklist:**

- \_\_\_ Form for Grant Funding
- \_\_\_ Short Answers
- \_\_\_ Business Plan/Budget for the project for which you seek funding
- \_\_\_ Financial Balance/Accounting Sheets/Budget for organization
- \_\_\_ For charities: Copy of 501(c)(3) Letter from the IRS

To send your completed application by email: **info@ElkhartCares.org**

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