

www.summerfest-ranchomurieta.org

Request for Funding

Date of Request:			
Name of individual maki	ng the request:		_
Name of Organization or	· Charity:		
Address:			-
Daytime phone:	E-mail: _		-
Amount requested: \$			
Total Cost of Project or A	Activity:	_	
What additional funds w	ill you be you raising	g besides those requested from Summerfest?	
How have or will you rai			
What are the goals of the	project/activity for	which the funds are requested?	

What community benefit would result if the request is granted (short term & long term)?
How many people will benefit and are they primarily from the Rancho Murieta/Wilton area?
How would the applicant(s) benefit?
Date funds needed if funding request approved:
Signature of Person Making Request:Date:
Are you a resident of Rancho Murieta?
For individual applicants: Please include two letters of recommendation from either an unrelated school employee, community member, employer, or church member who knows you well and can speak to your personal attributes. These should include such things as your character, attitude, work ethic, common sense, etc. Letter writers should also address why they feel you are deserving of receiving funding for your project from Summerfest.
For Summerfest Use Only:
Date Rec'd
By
Date Action:Action (approved/declined)
Date BOD:Action (if applicable)
Date Paid:Amount: