



Homer Davenport Community Festival

P.O. Box 472, Silverton, OR 97381 • <http://HomerDavenport.com/>

2017 - Charitable Grant Application

Name of Organization: _____

Full Address: _____

City: _____ State: ____ Zip: _____

Contact Name: _____ Phone: _____

Email Address: _____

Amount Requested: _____

1. Tell us a little about your organization. Describe what service(s) your organization provides to the community, being specific about who is benefitted, how often services are provided, and any limits that exist (if any) to your services:

Is your organization a registered Oregon Non-Profit? Y N

A registered Federal 501(3)(c)? Y N

2. Tell us about how the funds would be used. Be specific in regards to use for operations (such as paid staff, recurring supplies, advertising, etc.) or for capital purchases (equipment). Feel free to attach additional sheets for more detail.

3. When do you need the funds? _____

4. How do you plan to acknowledge the HDCF if you receive this contribution?

5. Would members of your group be willing to assist in helping with the festival?

Y N If yes, how? _____