



Letter of Inquiry Cover Sheet

Cover Sheet must be submitted with Letter of Inquiry

Organization Name _____

Street Address _____ City _____ State _____ Zip _____

Mailing Address _____ City _____ State _____ Zip _____

Telephone No. () _____ Fax No. () _____

Contact Person _____ Official Title _____

Telephone No. () _____ E-Mail _____

Web Site _____

Board President/CEO _____ Telephone No. () _____

IRS 501 (c)(3) nonprofit? Please check: YES NO

Federal Tax-Exempt No. _____

Project Title _____

Project Focus Area _____

Total Grant Request _____ Period Grant Covers _____

Project Implementation Date _____

Please give a brief statement in the space provided stating organization's mission.

Executive Director/CEO Signature _____

Date _____