



## Letter of Inquiry

Notice that data fields with asterisks (\*) are required information.

### Date

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\* Contact Name:

Title (if applicable):

\* Name of Organization:

\* Street Address 1:

Street Address 2:

\* City:

\* State:

\* Zip Code:

\* Phone Number:

\* Tax ID:

Contact Phone Number (if different):

\* Email Address:

Organization's website address (if applicable):

\* Are you a/an: non-profit organization

\* Reason for Grant Request (a brief description of what you need the funding for):  
2500 Characters Remaining

\* Beginning Date of Project:

\* Ending Date of Project:

\* Amount of Request:

\* Total Project/Program Cost: