FAITH LUTHERAN CHURCH APPLICATION FOR ENDOWMENT FUND GRANT

Deadline to submit is October 25, 2019

Date:		
Name of requesting O	rganization:	
Address:		
Contact Person:		
Contact Phone	Number:	
Contact E-Mail	Address:	
Description of need/Ho	ow will be used (use space below o	or provide attachment):
Has this organization	received grants from this fund in th	ne past? Yes No
If so, describe the use provide attachment):	e and benefit received from the p	rior grant (use space below or
· ·	n of Faith Lutheran Organization, formation) who can confirm the	• •
•	arded, we agree to provide written 2020 and present a brief report of i 9:45 AM.	
This application and c	confirmation should be directed to:	
	Faith Lutheran Church Endowment Committee 41 N. Park Blvd. Glen Ellyn, IL 60137	
Applying Organization	n Authorized Signature: Title:	
Grant Outcome:	Approve/Amount:	Denied: