



## Liberty Township Grant Application 2019

A Granting Project Facilitated by

Fulton County  
Community Foundation

### Supporting Liberty Township Now and Forever!

The Liberty Township Endowment Fund was created in 2018 to support charitable programs and projects within the Liberty Township community. Local businesses, residents and supporters of Liberty Township continue to contribute funds to make these grants possible.

From these contributions, grants are available for people, clubs and organizations that want to do good things for the people of the area. If you have a project that is benefiting the Liberty Township community, we encourage you to apply for this grant.

There is \$2,500 available to grant. Grants may be given to many different organizations, or only one or two depending on the applications received. Don't hesitate to apply even if you only need a few hundred dollars for your project.

### Entry Procedures

#### Please submit entries in accordance with the following guidelines:

- 1) Grant Proposals may be submitted by groups, organizations or projects which are charitable in nature. If your organization is a 501 (c) (3), attach a copy of your IRS Determination letter to the application.
- 2) Complete the Grant cover form and all sections of the application. Once completed, this cover form and application should be the first and second pages of your application.
- 3) Write a one to two page summary. This is the most important part of your documentation, so be as complete as possible. You are to answer the question posed at the beginning of the summary section of the application. This must be in typewritten form within the space provided, or attached as a separate typed document.
- 4) Document your application with up to two supplemental materials. Suggestions for supporting documentation include:
  - Information that supports factors or statistics used in your summary
  - Press clippings, brochures or fact sheets
  - Photographs (digital or film)
  - Promotional material
- 5) Please email the award application, summary and supporting materials to [corinne@nicf.org](mailto:corinne@nicf.org). Email is the preferred method, but you may also drop off applications and materials at the Northern Indiana Community Foundation (NICF) office, mail or FAX to NICF, ATTN: Corinne Becknell Lucas, P.O. Box 807, Rochester, IN 46975. All entries must be in the NICF office by the deadline, Monday May 6<sup>th</sup> 2019, to be considered for a grant.

#### Grants will not be considered for:

- Religious organizations for the sole purpose of furthering that religion
- Political activities or those designated to influence legislation
- National organizations (unless the monies are to be used solely to benefit citizens of Liberty Township)

Grant applications will be reviewed by an Advisory Committee (Committee) consisting of residents of Liberty Township as well as a member or members of the Fulton County Grant Committee.

#### Northern Indiana Community Foundation, Inc.

PO Box 807, Rochester, IN 46975

Phone: (877) 432-6423

[corinne@nicf.org](mailto:corinne@nicf.org) - [www.nicf.org](http://www.nicf.org)

Corinne Becknell Lucas - Associate Director

# LIBERTY TOWNSHIP GRANT

A GRANTING PROJECT FACILITATED BY  
FULTON COUNTY COMMUNITY FOUNDATION  
227 E. Ninth Street, P.O. Box 807  
Rochester, Indiana 46975  
574.223.2227 | Toll Free 877.432.6423

## 2019 Liberty Township Grant Cover Form

Name of Group or Organization: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Print or type the name of the program, as it would appear on the award:

\_\_\_\_\_

Dollar amount requested: \_\_\_\_\_

### All Entries Must Include:

- \_\_\_\_\_ Cover Form
- \_\_\_\_\_ Grant Application
- \_\_\_\_\_ Project Summary
- \_\_\_\_\_ Budget Summary
- \_\_\_\_\_ Supplemental Materials (if applicable)
- \_\_\_\_\_ Profit and Loss Report for the organization (if applicable)
- \_\_\_\_\_ Verification of Charitable Use of Funds (if applicable – page 6)

### Important Dates:

Application Deadline: **Monday May 6, 2019 by 4:30 p.m.**

Award winners will be announced: **no later than June 1<sup>st</sup>.**

### Send Your Submissions To:

NICF  
ATTN: Corinne Becknell Lucas, Associate Director  
P.O. Box 807  
Rochester, IN 46975  
FAX 574.224.3709

**All entries must be in the Community Foundation office by 4:30 p.m. on Monday May 6, 2019.**



## **Project Summary**

What will your project accomplish in the Liberty Township community and what are your plans for using the Grant should you receive one?

**BUDGET SUMMARY**

**Project/Activity Expenses**

- How the project money will be spent.
- Please place an \* next to the items for which you are requesting funding from the Community Foundation.
- Also list items from top to bottom in order of importance to the success of the project.

Item	Amount	% of Total Project
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
<b>TOTAL PROJECT/ACTIVITY EXPENSES:</b>	_____	_____

Copies of best estimates/contractor proposals appreciated.

**Source of Funds**

Please list other organizations where you have applied for funding or will be supporting the project.

Name of Organization	Amount Pending	Amount Given
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

All organizations that receive funds must report at project completion, giving a statement of impact and providing pictures when applicable.



227 E. Ninth Street, P. O. Box 807  
Rochester, Indiana 46975  
Phone: (574) 223-2227 ♦ Toll Free: (877) 432-6423  
Fax: (574) 224-3709 ♦ www.nicf.org

## Verification of Charitable Use of Funds

We verify, that as a duly appointed representatives of an organization that is not a 501(c)(3) corporation, we will use any and all funds received through the Northern Indiana Community Foundation for charitable purposes.

If at any time, the Grant Committee or Board of the Northern Indiana Community Foundation, Inc. determines that the funds distributed to our organization were not used in a charitable manner, we agree to repay those funds to the Northern Indiana Community Foundation, Inc. for redistribution to an organization that will use them in a not-for-profit manner.

Funds will be used for activities as outlined in the attached application.

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Name of Organization

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Printed name of duly appointed representative and title held within the organization

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Signature Date

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Printed name of duly appointed representative and title held within the organization

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Signature Date