



Applications for Mini Matching Grants

Date Rec'd \_\_\_\_\_

(For requests of \$500.00 or less)

Date Forw'd \_\_\_\_\_

Mini Matching Grant Application Deadlines are Jan. 31, April 30, July 31, Oct. 31

**SEND TO OHIO KIWANIS FOUNDATION PO. BOX 668 Circleville, Ohio 43113**

Sponsor Kiwanis Club \_\_\_\_\_

Address \_\_\_\_\_

Contact Persons Name \_\_\_\_\_

Contact Persons Title \_\_\_\_\_ Phone # \_\_\_\_\_

Organization Name \_\_\_\_\_

Is this organization tax-exempt \_\_\_\_\_ Tax Number \_\_\_\_\_

Attach Tax-exempt letter \_\_\_\_\_ Verified \_\_\_\_\_

Project Title and Brief Description \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Individual Group to be Benefited \_\_\_\_\_

Total Project Cost \_\_\_\_\_ Size of Group \_\_\_\_\_

How Much Is the Sponsor Kiwanis Club Contributing to the Project \_\_\_\_\_

Amount requested from Foundation. (up to \$500.00 in matching grant) \_\_\_\_\_

Club President: \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_

Recommendation from Foundation Board: \_\_\_\_\_

Date Approved: \_\_\_\_\_ Amount \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_