LEAD

Lee Co. Empowering, Advancing, and Developing

Grant Application   Date: _____

Thank you for completing this grant application. Requests for "seed money" (e.g. new projects or programs) are preferred; must be within Lee County

Organization Name: _____

Organization Address: _____

_____

Phone #: _____

E-Mail Address: _____

Org website and/or social media _____

_____

Tax ID number (if applicable) _____

501(c)(3)   Yes   No

Contact person: _____

Description of the Proposed Project - Please explain the need that exists, your solution, and the benefits that will result (300 words max):

_____
_____
_____
_____
_____
_____
_____
_____

(information may be entered on a separate sheet if necessary)

Population served (how many, what county, and any other identifying information):

_____

_____

_____

Project Date(s): _____

Is this a one-time or annual project? _____

Amount of Request: _____Total Project Budget: _____

Date funding is needed: _____

Itemized Budget: Please attach your budget document and/or email to leadleeco@gmail.com

Marketing: please upload/email any marketing materials (e.g. flier or newsletter) related to your application.