

**Cando Community Development Board
Application Form**

Organization Name: _____ Date: _____

Year Established: _____ TIN#: _____ Geographic Area Served: _____

Purpose of Organization: _____

Purpose of Project: _____

Amount Requested: \$ _____ Date Needed: _____ Number of Participants: _____

Do you charge participant fees? _____ How much? _____

What are you doing to raise funds? (Other than this request) _____

Contact Person: _____ Phone Number (day): _____

Mailing address: _____

You must attach a copy of the project budget. Since these funds consist of tax dollars, you may be requested to supply documentation as to how these funds are expended! If the funds are to be used for a purpose that differs from your request, pre-authorization is required by the Cando Community Development Board.

Definition of Qualifying Organization

A qualifying organization is defined to be non-profit in nature, whether established formally or informally, that applies for funding to benefit health, welfare, education, culture, entertainment or recreational needs of the community. Funding requests by individuals and religious organizations are not considered to be a qualifying organization.

The criteria for successful applications will consist of the following:

1. Organizations that have well supported budgets through fund raising and/or participation fees.
2. Organizations applying for funding which would provide a high value to the community in exchange for the dollars given.
3. Organizations which don't have adequate or alternate sources of funding.
4. Organizations requesting matching contributions to supplement the organization's own fund raising efforts.
5. Organizations that serve Cando and the Cando area.
6. Organizations that provide benefits for all types of activities including youth.

FINANCIAL STATEMENT

ORGANIZATION: _____

DATE: _____

ASSETS:

CHECKING: _____

SAVINGS: _____

ACCTS RECEIVABLE: _____

INVENTORY: _____

LIST: _____

EQUIP: _____

LIST: _____

OTHER: \$ -

LIST: _____

TOTAL ASSETS: _____

DEBTS:

ACCTS PAYABLE: _____

LIST: _____

LOANS PAYABLE: _____

LIST: _____

TOTAL DEBTS: _____

OPERATION INCOME AND EXPENSE

ORGANIZATION: _____

DATE FROM: _____

DATE TO: _____

INCOME:

TOTAL INCOME:

EXPENSE:

TOTAL EXPENSE:

NET INCOME:
