| PINAL 40, INC.GRANT FUNDING APPLICATION A 501(c)(3) Organization | | | | |
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| Applicant Information | | | | |
| Pinal 40 Member Sponsoring this Application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Funding Amount Requested: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| Please state the justification for why Pinal 40, Inc. should grant an award to this organization: | | | | |
| SuPPORTING INFORMATION | | | | |
| Organization Name: | | | | |
| Street Address: | | | How long? | |
| City: | | State: | Zip: | |
| E-mail: | | Phone: | Fax: | |
| Mailing Address, if different: | | | | |
| Contact Person and Position: | | | | |
| EIN, 501(c)(3) nonprofit and include a copy of your IRS determination letter: | | | | |
| Have you previously applied to Pinal 40, Inc. for funding? Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_  If yes, explain:  Do you have a social media presence? If so, please list your social media here. Also, if the grant is approved, do you agree to provide images and social media links demonstrating how this grant was used?  Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_  If the award is granted, would you consent to the use of pictures, image and likeness on our website and in social media (please see form attached and return with grant)?  Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_  If no, please explain.  Aprox number of youth this grant will support \_\_\_\_\_\_\_\_\_\_\_ | | | | |
| This grant’s relation to the Pinal 40, Inc. Mission Statement | | | | |
| Pinal 40 exists as a fraternity of community members who organized with the primary objective of promoting Pinal County, its youth as well as farming and agriculture related businesses. Philanthropically, Pinal 40 and its membership focus on providing support and funding for youth and education through agribusiness related scholarships and support of local charities.  How does your request relate to the overall mission of Pinal 40? | | | | |
| Please define the specific purpose and expenditures for which this grant will be used.  Please attach an itemized proposed budget breakdown of and an explanation of how you intend to utilize the grant money, if accepted.  If your application is accepted, will you provide confirmation of how the grant funds were expended?  Yes \_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_ | | | | |
| Signature of Applicant: | Signature of Pinal 40 Member: | | | Date: |
| For more information or to submit your application, contact: Jason DeCarlo – E: [jdecarlo@ellison-mills.com](mailto:jdecarlo@ellison-mills.com) C: 520.858.6160 | | | | |