



SAN MARCOS COMMUNITY FOUNDATION  
Grant Cover Page

(Choose one)  MINI-GRANT (Choose one)  REGULAR GRANT

Project Name: Date Submitted:	Total # of people served: Total # of San Marcos residents served:	Amount Requested: \$
Non-Profit Organization Name and Address, Website		Contact Person – Name, Title & Phone, email
Briefly describe your request for funds (to be expanded upon in narrative for regular grant):		
Briefly describe the significance of your request to the San Marcos community:		
Please attach the following items. <b>Both Mini-Grant &amp; Regular:</b> 1. Budget for request (use SMCF Budget Worksheet) 2. Annual Operating budget for the organization or unit 3. Federal & State Tax ID numbers 4. Board of Directors listing with affiliations <b>5. Regular Grants Only:</b> a. 1-2 page narrative b. First 2 pages of Federal 990 c. Most recent year-end Statement or Audit including any management letters associated with Audit. d. Signature of President or Authorized Officer on Application e. Optional: letters of support		Expected date project will begin/end: Date by which funds will be expended: Signature of President or Authorized Officer _____ Name, Title Date
		Submit Via Mail, In Person or Via Email to: San Marcos Community Foundation c/o City of San Marcos 1 Civic Center Drive San Marcos, CA 92069 Email (PDF Format): <a href="mailto:jimagee@san-marcos.net">jimagee@san-marcos.net</a>