

**Decatur County Community Foundation P.O.  
Box 278, Leon, IA 50144  
Grant Application**

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**1. APPLICANT requesting funding:**

**Applicant Address:**

**Contact Person:**

**Phone:**

**Email:**

**2. Federal Tax ID # of Applicant**

**3. FISCAL SPONSOR (if applicant is not a 501(c)3 from above):**

**Fiscal Sponsor Address:**

**Contact person:**

**Phone:**

**Email:**

**Federal Tax ID #:**

**4. Project Title:**

**5. Description of Project: (please attach a budget, estimate, and photos with your application)**

**6. Cost of Project:**

a. Amount of grant request: \$

b. Amount provided by others: \$

c. Amount provided by applicant (must be at least 25% of your budget): \$

d. Total Cost of Project: \$

(Sum of lines A, B, and C must equal line D. Line C should be no less than 25% of Line D)

**7. Type of Request: (check one)**

Capital Project (building improvements, structures, equipment, computers, etc.)

Program Based Project (activities, services, education, non-durable goods)

**8. Project Focus: (check one)**

Arts/Culture/Humanities

Health or Human Services

Education

Community Improvement

Youth Development

Recreation or Environment

**9. Anticipated completion date of Project:**

**Signature:**

**Date:**

Application must be postmarked by **March 15**, please attach a budget, estimate, and photos.

**Please check your postage to ensure the postage is the correct amount.**

**Mail 8 full copies of your application to:**

Decatur County Foundation

P.O. Box 278

Leon, IA 50144