

Revised Jan. 2025, previous versions are obsolete.

Completed form must be received by the last business day in **February** to be considered for the Spring Campaign.

Late or incomplete applications will not be considered.

Submit by mail to:
Thrift Shop
P.O. Box 118
Fort Leonard Wood, MO 65473

Please complete the following application. Respond in the space provided or attach a narrative that responds to each of the questions. **For maximum consideration, please provide detailed responses and supporting documentation.**

Please include the specific item or service you are requesting, **and attach a description with a picture from a website or catalog and/or a quote from the intended service provider. Copied links will not be accepted.** Provide a specific cost amount. If more than one item is included on this outreach request, please provide a cost breakdown for each item/service for which this application is being made.

APPLICATION REQUIREMENTS

- All applicants must have educational institution or verifiable non-profit status.

Funding requests for FRGs, fundraising supplies, or food for an event will not be considered. Grants may not be used to pay past bills or used to pay delinquent accounts.

- Payments awarded must be deposited within **30 days of receipt**. If funds are not deposited within 30 days, the monies must be returned or the check will have an immediate “stop payment” issued.
- **Within 60 days, all organizations receiving grant funds are required to submit:**
 - 1. a receipt and/or proof of purchase and
 - 2. An Outreach Grant Report: a letter of acknowledgement, stating that the monies were utilized for the purpose stated in the application.
- If the amount granted does not cover the full cost of the item(s) in the application, please state in the report that the amount is being held in an account earmarked for the requested items, while further funds are raised.
- **Failure to return the Outreach Grant Report may result in your organization being ineligible to apply for the Thrift Shop Outreach Grant for one year.**

FLW Thrift Shop Outreach Grant Application

Please type or neatly print the following detailed information:

1. Name of organization: _____
 - Non Profit: _____ • Tax ID (if applicable): _____ • Educational Institution: _____
 - a. Point of contact: _____
 - b. Title/Position of Requestor: _____
 - c. Phone number: _____
 - d. Email: _____
 - e. Mailing address: _____
 - d. To whom should we make out the check?

2. Write a brief paragraph about your organization: its purpose/mission, types of activities, sources of financial support, etc. If a national organization, attach a mission statement.

3. Fund request information: Explain in detail why your group or organization would benefit from the grant.

- a. Total budget necessary for project/event/items: \$ _____
- b. Amount requested from the Thrift Shop at this time: \$ _____
- c. Please list any other organization you solicited or plan to solicit for the specific request and amount requested: _____

4. Specific purpose for which requested funds will be used:

5. Who will benefit from funds? (I.e. number of people, demographics)

6. What percentage served by your organization are associated with the Military?

The undersigned certifies that the information provided on they form is true and accurate:

Signature: _____ Date: _____

Appropriate Authority Signature Required (i.e. Supervisor, Commanding officer, Principal)

Name (Please Print): _____ Title: _____

Signature: _____ Date: _____