Lavery Family Foundation

| LETTER OF INTENT | |
|--|------------------------|
| Please submit this information and await response prior to completing or submitting the application for funding. We will contact you to let you know if we are interested in further information regarding your proposal. We will get back to you within 3 weeks. Thank you for your interest. | |
| Please provide brief information on an additional page if needed. | |
| Date of Letter of Intent: | |
| Name of Organization Applying: | |
| Does your organization have 501 © 3 status?Y | esNo |
| Executive Director: | Phone Number: |
| Contact Person/Title/Phone Number ((If different from Executive Director) | |
| Address: | |
| City/State/Zip: | |
| FAX Number: | Email Address: |
| Project Name: | |
| Dates of Project: | _Amount Requested:\$ |
| Administrator Signature and Date | Legible Name and Title |
| Proposal (Brief explanation – no more than several | short paragraphs): |
| Current Status: | |
| Current Funding Sources: | |
| Potential Funding Sources: | |
| Community Impact: | |

Submit information to: Katie@Lavery.Foundation