

**United Way of Ponca City
Jesse and Barbara Manering Endowment
Application for Funds**



**United Way
of Ponca City**

Organization Name: _____

Address: _____

Contact Name: _____

Phone: _____ **Fax:** _____ **e-mail:** _____

Total amount of funds requested \$ _____ **Total cost of the project \$** _____

PLEASE ANSWER THE 3 QUESTIONS BELOW. NO MORE THAN 2 TYPE WRITTEN PAGES

Organization Mission or Purpose:

Identify the need being addressed:

Describe the proposed program's or project's purpose, including how it will address the need(s) identified and population served, if applicable:

Primary Goals and Outcomes Expected of Funding:

If there are additional funding sources for this project/program, please list below with amount contributed:

Eligibility:

_____ IRS 501(c)3

_____ Affiliated with tax-exempt organization or governmental unit

_____ Other, please give specific explanation _____

Does your organization have an annual outside audit? _____ Yes _____ No

Period of time in which funds will be spent: From _____ to _____

Signature of chief staff person and officer of the board of Directors:

Chief Staff Person: _____ Board of Directors: _____

Print Name _____ Print Name _____

Signature _____ Signature _____

Title _____ Title _____

Date _____

**Please return completed application to:
United Way of Ponca City, 205 2nd Street, Ponca City, OK 74601**

For Office Use only _____

Date Received in United Way office: _____ Received by: _____
(Signature)

Date Reviewed _____ Recommended for Approval _____ YES _____ NO

Date Funds Distributed _____