

Monroe County Historical Society  
P.O Box 422  
Sparta, Wisconsin 54656-0422

### Request For Funding Form

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Contact: \_\_\_\_\_

Telephone: \_\_\_\_\_

Is this a tax-exempt organization? ( ) Yes ( ) No (If no, explain)

Does the organization have IRS 501 ©3 status? ( ) Yes ( ) No If Yes attach copy of letter ruling, If No attach explanation

Date Established: \_\_\_\_\_

Date Incorporated: \_\_\_\_\_

Describe nature and stated intent of organization:

\_\_\_\_\_

\_\_\_\_\_

Amount requested: \$ \_\_\_\_\_

Purpose of funds requested:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PLEASE ATTACH THE FOLLOWING DOCUMENTS TO YOUR REQUEST:

1. Copy of Articles of Incorporation
2. Copy of By-Laws
3. Names and addresses of Officers
4. Names and addresses of Directors
5. Copy of budget for current fiscal year (Indicate where funding would be applied)

I certify that the above and attached Information is true and correct to the best of my knowledge.

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_