

Douglas County Community Foundation

900 Massachusetts Street., Suite 406

Lawrence, KS 66044

Telephone: 785-843-8727

Fax: 785-843-8735

Grant Recommendation Form

Date _____

Pursuant to the terms of the _____ Fund, which is administered at the Douglas County Community Foundation, I suggest a distribution from the fund in the following amount to the listed nonprofit organization:

Organization _____

Amount _____

Contact Person at Organization (if known) _____

Organization Address _____

Special Instructions _____

I acknowledge that the above suggestion must meet the approval of the foundation’s board of directors. I also understand that the above-suggested grant does not represent the payment of any pledge or other financial obligation of me or any member of my family, and that neither I nor any member of my family expects any personal benefit from the grant.

Donor Signature

Address

Phone

