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| JAMES G. HANES MEMORIAL FUND/FOUNDATION GRANT APPLICATION |

**(When completed please email to Lyn at** [**LW@SalemCounsel.com**](mailto:LW@SalemCounsel.com?subject=John%20W.%20&%20Anna%20H.%20Hanes%20Grant%20Application&%20Anna%20H.%20Hanes%20Grant%20Applicatio&%20Anna%20H.%20Hanes%20Grant%20Applicati&%20Anna%20H.%20Hanes%20Grant%20Applicat&%20Anna%20H.%20Hanes%20Grant%20Applica&%20Anna%20H.%20Hanes%20Grant%20Applic&%20Anna%20H.%20Hanes%20Grant%20Appli&%20Anna%20H.%20Hanes%20Grant%20Appl&%20Anna%20H.%20Hanes%20Grant%20App&%20Anna%20H.%20Hanes%20Grant%20Ap&%20Anna%20H.%20Hanes%20Grant%20A&%20Anna%20H.%20Hanes%20Grant%20&%20Anna%20H.%20Hanes%20Grant&%20Anna%20H.%20Hanes%20Gran&%20Anna%20H.%20Hanes%20Gra&%20Anna%20H.%20Hanes%20Gr&%20Anna%20H.%20Hanes%20G&%20Anna%20H.%20Hanes%20&%20Anna%20H.%20Hanes&%20Anna%20H.%20Hane&%20Anna%20H.%20Han&%20Anna%20H.%20Ha&%20Anna%20H.%20H&%20Anna%20H.%20&%20Anna%20H.&%20Anna%20H&%20Anna%20&%20Anna&%20Ann&%20An&%20A&%20&)**)**

**PART I – THE ORGANIZATION**

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| --- | --- |
| **Organization Name:** | |
| **Phone:** | **Date of founding:** |
| **Address:** | |

|  |  |
| --- | --- |
| **Contact Person Name:** | |
| **Title:** | **Org. Web Address** |
| **Phone:** | **Email:** |

**Please provide a brief description of your organization below:**

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| --- |
| **Major goals and purposes:** |
| **Range and scope of programs:** |
| **Properties owned or rented:** |
| **Principal means of support.** (Include a summary financial report of the most recent year’s operation when returning this form, if available): |

**PART II – THE PROJECT**

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| **Describe the specific geographic area to be served by the project.** |

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| **Beginning *and* Ending Dates of the Project:** |

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| **Amount requested from the James G. Hanes Memorial Fund/Foundation.** (Give reasons for seeking this amount): |

**Please provide a brief summary of the project to be funded by the grant below:**

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| **What is the scope and purpose of the project?** |

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| **How will the project be executed?** |

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| **How will impact be measured?** |

|  |  |
| --- | --- |
| **Total expected project expenses by category:** | |
| **Expense Item:** | **Amount:** |

|  |  |  |
| --- | --- | --- |
| **Other sources of financial aid applied for to fund the project:** | | |
| **Organization Name:** | **Amount Applied For:** | **Status** (Pending, Granted, Denied) |
| **Organization Name:** | **Amount Applied For:** | **Status** (Pending, Granted, Denied) |

|  |  |  |
| --- | --- | --- |
| **Federal or State Aid applied for to fund the project:** | | |
| **Organization Name:** | **Amount Applied For:** | **Status** (Pending, Granted, Denied) |
| **Organization Name:** | **Amount Applied For:** | **Status** (Pending, Granted, Denied) |

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| **Plans for future years funding of the project, if applicable:** |

|  |  |
| --- | --- |
| **Submitted by:** | |
| **Date:** | **Signature & Title:** |

**(When completed please send this application to Lyn Williams at** [**LW@SalemCounsel.com**](mailto:LW@SalemCounsel.com?subject=John%20W.%20&%20Anna%20H.%20Hanes%20Grant%20Application&%20Anna%20H.%20Hanes%20Grant%20Applicatio&%20Anna%20H.%20Hanes%20Grant%20Applicati&%20Anna%20H.%20Hanes%20Grant%20Applicat&%20Anna%20H.%20Hanes%20Grant%20Applica&%20Anna%20H.%20Hanes%20Grant%20Applic&%20Anna%20H.%20Hanes%20Grant%20Appli&%20Anna%20H.%20Hanes%20Grant%20Appl&%20Anna%20H.%20Hanes%20Grant%20App&%20Anna%20H.%20Hanes%20Grant%20Ap&%20Anna%20H.%20Hanes%20Grant%20A&%20Anna%20H.%20Hanes%20Grant%20&%20Anna%20H.%20Hanes%20Grant&%20Anna%20H.%20Hanes%20Gran&%20Anna%20H.%20Hanes%20Gra&%20Anna%20H.%20Hanes%20Gr&%20Anna%20H.%20Hanes%20G&%20Anna%20H.%20Hanes%20&%20Anna%20H.%20Hanes&%20Anna%20H.%20Hane&%20Anna%20H.%20Han&%20Anna%20H.%20Ha&%20Anna%20H.%20H&%20Anna%20H.%20&%20Anna%20H.&%20Anna%20H&%20Anna%20&%20Anna&%20Ann&%20An&%20A&%20&) **along with a copy of your IRS letter showing determination of your tax exempt status and a summary financial report of your most recent fiscal year.)**