



PO Box 240701
Anchorage, AK 99524
aefcharities@gmail.com
EIN: 81-3583556

GRANT REQUEST FORM

Project Title: _____

Research Education Equipment/Supplies

IRS Status: 501(c) _____ IRS Tax Identification Number _____

Grant Amount Requested \$ _____

Recipients Name: _____

Address: _____

City: _____ State/ _____ Zip: _____

Contact: _____ Phone _____

Check Payable To: _____

Organization Requesting Grant: _____

Authorized Signature: _____

Presentation Date/Date Check needed by: _____

INCLUDE

- Grant Form Completed in Full IRS Determination Letter
- Grant Form Signed and Dated Nonprofit status enclosed
- Project** resume on recipient letterhead detailing use of funds and affirming no administrative use of fund

Date Rcvd _____	
Date Approved By Foundation: ____/____/____	Approved Grant Amount: \$ _____
Date Issued _____	Grant # _____