



SAN DIEGO CHINESE WOMEN'S ASSOCIATION

REQUEST FOR FUNDING APPLICATION: DUE APRIL 1, 2019

Organization:		
Contact Person:		
Mailing Address:		
City:	State:	Zip:
Email:	Phone:	
Amount Requested:	501 (C) 3 Yes _____ No _____	Federal Tax ID #

1. Describe the program or project for which you are requesting funding:

2. Organization's Mission Statement:

3. List programs/services (with a brief description) that you provide the community:

4. Please include a copy of your organization's latest annual report or Statement of Financial Activities.

Estimate Operating expenses for latest fiscal year _____

Please list: % Government Grants _____ % Corporate Contributions _____

% Individual Contributions _____ % Other (describe) _____

(Percentages should total 100%)

5. Have you previously received funding from the San Diego Chinese Women's Association?

When _____ For What Project _____ Amount Received \$ _____

Submitted by (name)

Date:

You may use one additional page to address questions #1-3. Please submit completed application as an email attachment to: emlhom@yahoo.com OR submit a completed typed application postmarked by April 1, 2019 to:

SDCWA Philanthropies Committee
P.O Box 881882
San Diego, CA 92168-1882