



Central Lutheran Foundation

Funding Request

Organization _____

Address _____

Area Code and Phone Number _____

Contact Person _____

Mission and/or Goals: _____

Amount requested _____

How will funds be used? _____

Expected Outcome/s _____

What % of organization's budget is administrative overhead? _____

Has organization received funding from CLF previously? _____

If so, when and how were funds used? _____

Additional information that would be helpful (attach if necessary) _____

Please check where applicable: Lutheran Org. _____ Christian Org. _____

Non-profit 501 (c) 3 _____ Social Service _____ NGO _____

Attach W-9 form, agency literature or other information as pertinent

Send to: **Central Lutheran Foundation**
1857 Potter, Eugene, OR 97403

*Applications must be received by November 1, 2017
For Disbursement in early 2018*