

Bonnell Cove Foundation Grant Summary Form

This form is a summary of your proposal. Please complete all fields, save, print and sign the form. Include all required documentation listed in the checklist at the bottom of the Proposal Form and mail to Secretary, Bonnell Cove Foundation, 1 Scott Lane, Mystic, CT 06355 or email to bonnellcove@gmail.com

Section I: Contact Information					
Legal Name of Organization				EIN:	
(per IRS 501(c)(3) letter):			Date:		
Contact:		Title:			
Address - line 1		Address - line 2			
City:	State:	Zip:		Country:	
Telephone:		Fax:			
E-mail Address:		Web site address:			
Section II: Organizational Description					
Provide a summary of the organization. (Limit	750 characters.)				
Section III: Financial Summary					
Provide data for two prior years and your curre			<u> </u>		
	Operating	Operating	Change in Unrestricted		
Drie - Ve en Audite d'Income Otatana est	Revenue	Expenses	Net Assets	Change in Endowment	
Prior Year Audited Income Statement	\$	\$	\$	\$	
Most Recent Audited Income Statement	\$	\$	\$	\$	
Current Year Budget	\$	\$	\$	N/A	
Section IV: Request Description					
Request Type:	Safety at Sea		Environment of the Sea		
Summary of Request (Limit 750 characters):					
Project Budget:	Amount Reques	ted:		Amount Raised	
\$				To Date: \$	

Please include the following information: Name of funder, amount of funding and status of fundaments of funder Name of Funder Amounts \$ \$ \$ \$ Total Pending \$ Total Committed \$ Total Received \$ Section VI: Evaluation Plan How will you evaluate your project?	nding (Received, Committed or Pendin unt of Funding	g) Status: Received/Committed/ Pending			
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How will you evaluate your project?					
riow will you oralidate your project.					
Section VII: Expected Results A. What are the key objectives you expect this project to ac	hieve?				
PRINT, SIGN AND MAIL THIS FORM WITH R	EQUIRED DOCUMENTATION				
I hereby certify the information provided, is accurate, complete and current.					
Print Name					
Signature	Title				