

**Junior Board of Rock Island
Cover Sheet
(Application for Requests of Funding)**

Agency/Organization Name: _____

Date of request: _____

Location Address: _____

City/State/Zip: _____

Mailing Address: _____

Phone: _____ Fax: _____

E-Mail Address: _____

Contact Person and Title: _____

Have you received funding from the Junior Board of Rock Island in the past?

Circle One: Yes No

If yes, what type of support have you received? (Provide dates, amounts and types of support)

Does your Agency/Organization have a website? If yes, please provide address:

Is this an annual event/program?

Amount of Requested Funds:

Signature of Applicant

Date

Printed Name and Title of Applicant

Submit to: Treasurer, Junior Board of Rock Island, P.O. Box 6041, Rock Island, IL 61204-6041
OR via email at info@jbri.org