

Application for Donation

Name of Organization:			
Contact Person:	Title:		
Contact Email:	Contact Phone	Contact Phone:	
Address of Organization:			
City:	State:	Zip:	
How long has your organization been in exis	tence?		
What is your 501 (c)(3) Federal Tax ID#? Please note Lawrence Board of REALTORS® Community Fou	andation will only consider applications from 5		
Describe the purpose/importance of your or	ganization.		
How does your organization tie into the Law "solutions for housing needs."?	rence Board of REALTORS® Com	munity Foundation Mission	
Amount requested \$ M	ake donation navable to:		

Describe the planned use for these funds. Be Specific. Attach separate page if needed.
What geographic area will this funding benefit?
Number of individuals expected to be helped or served from this funding?
Has your organization been funded in the past by Lawrence Board of REALTORS® or Lawrence Board of REALTORS® Community Foundation? If so, when?
Please provide any additional information that would be helpful to our Foundation Board and Trustees.
Lawrence Board of REALTORS® Community Foundation reserves the right to request additional information from applicant/organization if needed.
Please send your completed application and brochure/newsletter describing your organization, it's mission/goals to foundation@lawrencerealtor.com , drop off in person or mail to:
Lawrence Board of Realtors 3838 W 6th St.

Lawrence, KS 66049