Proposal Cover Sheet

OTTO BREMER FOUNDATION

ate:		
	nt OProgram-Related Investment	
CONTACT INFORMATION		
egal name of applicant organization	on (as it appears on the current 501(c)(3) decision letter)	
President / Executive Director	♠ Mr. ♠ Ms. ♠ Dr. ♠ Telephone Email	
Organization Address		
City State Zip Code		
Sity State Zip Gode		
Telephone Fax Website		
Name / title of contact person rega	arding proposed work Telephone Email	
This organization is: © 501(c)(3) n	nonprofit	١
SPONSORED ORGANIZATIO	ON (IF ADDITIONE)	
STONSONED ONGANIZATIO	W (II AT LICABLE)	
If the erganization above will be estimated	ng as a fiscal sponsor, please provide the name of the organization/program that the fisca	al anapaar plana ta uga ta
accomplish the proposed work.	ig as a fiscal sponsor, please provide the fiame of the organization/program that the fiscal	ii sporisor plans to use to
Contact Person Mr. Ms. (n Dr. O	
Contact Forson Civil. Civil.	<u> </u>	
Organization Address		
City State Zip Code		
Telephone Fax Website		
SUMMARY OF PROPOSED I	PROJECT (BRIEF ONE-SENTENCE PURPOSE DESCRIPTION)	
FINANCIAL INFORMATION	Amount requested: \$	
	Total program cost, including requested amount: \$	
Cu	rrent year total annual organization budget of the applicant: \$	
	Duration of proposed grant period (start/end dates):	
	Fiscal year start and end:	
SIGNATURE By signing, I am	nindicating that I've reviewed this proposal and that all of its contents are true	s.
Name of board chair or authorize	ed representative Signature	