

Paul Eason
Chairman

Patricia Clark
Kenny Comeaux
George deGravelle
Patrice Ellis
Susie Heroman



Peggy Voorhies
Secretary/Treasurer

Charlene Kennedy
Patrick Kennedy
Lucile Maroney
Jeannine McCloskey
Arleen Orgeron

GRANT APPLICATION

DATE _____

Everyone requesting funds from our foundation is required to submit a Grant Application. Any funds approved by this foundation for this grant request must be used as specified. Verification is required.

- Your Grant Application on our official form may be submitted electronically.
- Submit application in full and make sure all attachments are legible.
- Submit application before MARCH 1ST, AUGUST 1ST, or OCTOBER 1ST to be considered for the foundation board meetings held in those months.
- Keep a copy of the Grant Application for your records.

1. Name of your Organization _____

Year Established _____

Contact Person _____

Phone _____

Organization Address _____

E-Mail _____

2. Organization's Tax Identification Number _____

3. Title of Project _____

4. Projected Cost of Project _____

5. Amount Requested _____

6. Project Activity Dates From _____ to _____. (If Applicable)

7. Provide a brief description of what this grant money will be used for.

8. Provide a detailed description of your organization and its function. Please include the number of employees and volunteers.

9. Who will benefit from this project? Specify the geographic area involved.

10. If equipment/supplies are part of this application, please submit a prioritized list to include the cost of each item and a grand total. If lengthy, include as attachment.

11. What funding resources does your organization provide for this project?

12. Provide any additional information, not listed above, that will assist the foundation board in making a favorable decision on this application.

13. Will the recognition of our company be acknowledged? If so, how?

Required Attachments:

_____ IRS letter documenting 501 (c) (3) tax exempt status

We hereby certify that all facts, figures, and representations made in the application, including attachments, are true and correct to the best of our knowledge.

Director's Signature

Printed Name

Date



MARTIAL F. BILLEAUD, SR. FOUNDATION

Date _____

GRANT PROGRESS REPORT

Recipients of grant funds from the Martial F. Billeaud, Sr. Foundation are required to submit this form no later than six months after receiving the funds.

Failure to submit a Grant Progress Report may affect the approval of future grant requests.

Name of Organization _____ Phone _____

Title of Project Funds _____ Amount Received _____

Is your project completed? Yes ___ No ___ Number of recipients involved _____

Distribution of Grant Funds

Expenditures	Dollar Amount
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____

Grand Total _____

Use the back of this form if additional space is needed.

If applicable, pictures of the completed project may be helpful.

Print name of person completing this report _____