

## Request for Funding

Please fill out the entire form and provide requested documentation.

Your group must be a certified non-profit as the IRS regulations for the Hugs & Kisses Animal Fund stipulate that we can only grant funds to certified non-profit groups, not individuals.

Please allow up to 60 days for response. If the need is urgent, please state reason and time frame for response.

Hugs & Kisses Animal Fund 851 E Howards Rd Camp Verde , AZ 86322

> Tel (800) 430-HUGS Fax (844) 553-3344

www.HugsAndKissesAnimalFund.org

We only accept groups with no paid administrative costs/salaries, and a 5-year track record from the date of the IRS determination letter.

Organization Details							
Name of person making application:							
Name of Rescue Group affiliation (if applicable) :							
Address:	City:	State:	Zip:				
Telephone: E-mail:							
What is the best way to reach you?	☐ e-mail	□ phone					
Is this your first application for a grant from Hugs & K		ses?	☐ Yes [	□ No			
Grant Overview							
Please describe the nature of the grant (food, litter, training, prosthetics / aides, veterinary care, spay/neuter event, etc.). Include animal name and circumstances of rescue if for a specific animal. If for multiple animals provide information as to specific need(s). If we can provide an "in kind" or "sponsored" donation let us know as well.							
Financial / funding information							
How much are you requesting? Current grant limitation is up to \$1000			\$				
Is your rescue group a certified non-profit? (See proof of certification below)			-	□ Yes	□ No		
Publicity							
It is a condition of Hugs & Kisses Animal Fund that it may publicize grants that are made via our website, newsletters, etc. Please confirm that this is acceptable to you.				□ Yes	□ No		
We encourage grant recipients to spread the word about our organization by linking websites to our site and including our information at benefits and in newsletters etc.							

Required Documents - email to: denise@hugsandkissesanimalfund.o	rg					
Copy of IRS determination letter indicating 501 (c) 3 tax exempt status for 5 yrs.	□ Yes					
List of Board of Directors including affiliations, tenure, and terms.	□ Yes					
	☐ Yes					
What percentage of the Board of Directors financially supports the organization?	Yes					
Annual Report	_					
Organization Financial Statements - past two fiscal years (audited if possible)	□ Yes					
Current operating budget for the organization (expenses and income)	☐ Yes					
Statement of how organization currently solicits and receives funds	□ Yes					
Declaration to be completed by <u>all applicants</u>						
I declare that the information given on this form is true and that any funds received would be solely for use as detailed above.						
I understand that Hugs & Kisses Animal Fund has the right to deny my fund application for any reason.						
<ul> <li>I have fully completed this application form, and enclosed cost estimates.</li> <li>I understand that any enclosure will not be returned.</li> </ul>						
<ul> <li>I understand that any enclosure will not be returned.</li> <li>I agree to make invoices/receipts available on request.</li> </ul>						
I agree to abide by any conditions set out by Hugs & Kisses Animal Fund in ma	king the grant.					
Print name:	ite:					
Signature:						
Additional Supporting Details						
Additional Supporting Details						
Additional Supporting Details						
Additional Supporting Details						
Additional Supporting Details						
Additional Supporting Details  Please photocopy this application for your personal record						
Please photocopy this application for your personal record						
Please photocopy this application for your personal record						
Please photocopy this application for your personal record  For official use only  Application accepted:  (Signed by Director)  Application denied:						
Please photocopy this application for your personal record  For official use only  Application accepted:						
Please photocopy this application for your personal record  For official use only  Application accepted:  (Signed by Director)  Application denied:  Check Number:						