



The Torrey Pines Kiwanis Foundation, Inc.®

TORREY PINES KIWANIS FOUNDATION PROGRAM FUNDING REQUEST

Organization _____

Contact Person/Title _____

Address _____

Phone _____ Cell _____ Fax _____

E-mail _____ Website _____

Summary of your organization's activities _____

Specific use of requested funds _____

Number people to benefit _____

Requested Amount _____ Date Needed _____

Federal Tax I.D. _____ Non-Profit Class 501c _____

Non-profit Corp formal name: _____

The check should be made payable to:

Please Mail by October 1, 201x for funding required the following year. Mail to: Ross Ehrhardt, Vice President of Special Programs - Torrey Pines Kiwanis Foundation, 8677 Villa La Jolla Drive, Suite 1144 La Jolla, CA 92037 or e-mail: rossandsue@cox.net and pkballantyne@sbcglobal.net.



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Please include your annual budget summary for 2013 (income including income from grants, fees, and donations, assets, and liabilities; Administration vs. programs expense; Number of paid staff, number of volunteers.

Please Note: If funding is granted, the recipient will be asked to be actively support the Torrey Pines Kiwanis fundraiser, the La Jolla Festival of the Arts, held the third weekend in June at UCSD Warren Field.

For Torrey Pines Kiwanis Use Only: Kiwanis Member Liaison_____