



CITY OF LA PINE

Community Funding Request Application

The City of La Pine may provide funding assistance to non-profits and other entities that serve the La Pine community for projects or programs based on need versus the City's financial ability to assist. **Effective immediately, all Community Funding Request Applications must be accompanied by the attached budget spreadsheet.**

Please type or print clearly:

1. Organization: _____
2. Mailing Address: _____
3. Telephone No: _____ E-mail: _____
4. Contact Person: _____
5. Requested Amount: \$ _____ In-kind Amount \$ _____
6. Project/Purpose For Funds, including date(s): _____

7. Are you an authorized 501(c)(3) corporation by the IRS? ___ Yes ___ No
8. Have you sought funding from the City of La Pine in the past? ___ Yes ___ No
9. Were funds provided from the City of La Pine? ___ Yes ___ No

Amount: \$ _____ When: _____

10. Have you requested money from other sources? ___ Yes ___ No
If "yes," from where?

11. Is this a one-time request or will there be any additional funding requests for this project? Explain.

Staff Review: Funding Source: _____

Remaining amount if project funded: _____

Staff's recommendation to fund request: _____



L A P I N E

O R E G O N

Budget Spreadsheet

Name of Event: _____

Income	Estimated	Actual
Event Proceeds (entry fees, ticket sales, etc.)		
TOTALS		

Extra Sales (auction, raffle, misc. sales)	Estimated	Actual
TOTALS		

Sponsorships	Estimated	Actual
TOTALS		

Donations	Estimated	Actual
TOTALS		

Expenses	Estimated	Actual
Site/Decorations (equipment, balloons, food, etc.)		
TOTALS		

Other Expenses	Estimated	Actual
TOTALS		

	Estimated	Actual
Overall Budget		
Income		
Expenses		
Net Profit (Loss)		