

Sawyer County Outdoor Projects & Education (SCOPE) Donation Request Form

Organization Information

Organization Name			
Organization Tax Status:		(Are you a 501c3 organization?)	Years in Existence?
Address		City	State Zip Code
Contact Person			Phone Number
Title		Contact E-Mail	
Organization Mission Statement			
Website			

Project Information

Project Title	
Geographic Area to be served	
Client group to be served	Size of group
Anticipated Project Period	Date funds are needed by
Total Project Cost \$	Amount Requested from SCOPE \$
Description of how funds will be used	
Are any other organizations being asked to help fund this project?	
If yes, what other organizations?	
Signature	Date

Office Use

Submission Date: _____ Received by: _____

For additional comments please use back of page.

Other comments or pertinent information:

Please return to SCOPE board member or mail to:

SCOPE
Attn: Cindy Hanus
PO Box 424
Hayward WI 54843