



DFA Charity Selection Application 2019 Proposal Form

Date: _____

Name of Organization: _____

Contact Name: _____ Position: _____

Address: _____

City, State, Zip Code: _____

Contact Email: _____ Website: _____

Describe purpose and service for which DFA monies will be used:

Is the Organization affiliated nationally or locally? _____

Organization Specifics:

Number of paid staff members: _____ Number of clients served on annual basis: _____

Number of volunteers: _____ Annual budget: _____

Sources of Financial Support:

Individual contributions: _____ Government funds: _____

Corporate gifts: _____ Foundations: _____

Auxiliary donations: _____ Other: _____

If previous DFA recipient, how much was received, how were those funds used, and what year?

What geographical area does the Organization serve?

What age group does the Organization serve? _____

Would the DFA be assured that our donated funds would not be used to fund any charity other than your own, and would be ear marked for use by Carefree, Paradise Valley, and/or Scottsdale area residents?

Methods of reaching and screening for the truly needy:

Specific immediate needs (equipment, supplies, personnel, etc.):

Future needs (building, vehicles, etc.):

Does this Organization send an annual fund letter?

Checklist: Please include the following:

1. Documentation of 501©3 status
2. List of current members on your Board of Directors
3. Descriptive Brochure (if available)
4. Annual Report (if available)

Executive Director

Date: _____

Completed Applications are due no later than October 16, 2019 to:

Lee Ann S Fennessy
5832 East Joshua Tree Lane
Paradise Valley, Arizona 85253
Leeann7@aol.com

www.desertfoundationauxiliary.org