



Marie Lamfrom

CHARITABLE FOUNDATION

9740 SW Hillman Court
Suite 200
Wilsonville, OR 97070

Organization Financial Information

Fiscal Year: From _____ To _____

Organization budget for current year	
Organization expenditure total for last year	
Organization revenue total for last year	

Revenue breakdown for last year:

Memberships & individual contributions	
Ticket sales, fees for service, other income	
Fundraising benefits	
Corporate/business contributions	
Government support	
Foundation support	
Endowment earnings	
Other (identify sources):	
From last year's revenue sources, please list the five single largest contributors and amounts provided. (Contributors include specific individuals, agencies, businesses, foundations, or other groups. Individuals may be listed as Anonymous #1, #2, etc., if necessary.)	

Have you received funds from the Marie Lamfrom Charitable Foundation before?

Yes No

Please list year, amount, and for what project(s):



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Project Narrative

1. Applicant Organizational Background

Briefly describe your organizational mission, qualifications, history of success, who you serve, and the role of volunteers. (If this is collaboration, describe the lead agency and its relation to others involved.)

2. Needs Statement

Identify the needs your agency or this proposal will address, including what effort will be made to work cooperatively with other agencies.

3. Proposal

A. Who is the proposed project serving (include numbers and geographic area)?

B. How will your proposal address identified needs?

C. Projected goals, objectives, timeline, anticipated impact

D. Expected role of volunteers

E. Who will benefit from your proposal?

F. How will you monitor your work and how will you measure success or effectiveness?

G. What are your other potential and actual sources of support for this proposal? List all sources and note if funds are secured.