



# CITY OF GEARHART

PO Box 2510  
698 Pacific Way  
Gearhart, OR 97138  
503.738.5501

## GRANT DONATION REQUEST FORM

NAME OF ORGANIZATION: \_\_\_\_\_

DESCRIPTION OF ORGANIZATION: \_\_\_\_\_

\_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

RETURN ADDRESS: \_\_\_\_\_

FEDERAL NON-PROFIT TAX ID#: \_\_\_\_\_

(if applies) OREGON DOJ#: \_\_\_\_\_

AMOUNT OF DONATION REQUESTED: \_\_\_\_\_

DATE THE DONATION IS NEEDED BY: \_\_\_\_\_

REASON FUNDS ARE NEEDED: \_\_\_\_\_

DESCRIBE IF/HOW FUNDS WILL SPECIFICALLY BE USED IN GEARHART: \_\_\_\_\_

\_\_\_\_\_

SIGNATURE OF REQUESTOR: \_\_\_\_\_ DATE: \_\_\_\_\_

**REQUIRED ATTACHMENT:** *Please include a copy of your Organization's annual budget for review.*

PLEASE SUBMIT YOUR REQUEST BEFORE 5:00 P.M. APRIL 24<sup>TH</sup>, 2023.

A PUBLIC HEARING WILL BE HELD MAY 4<sup>TH</sup>, 2023 AT 6:00 P.M.

\*\*\*APPLICANTS ARE ENCOURAGED TO ATTEND\*\*\*

Requests can be mailed or delivered to:  
City of Gearhart  
698 Pacific Way PMB 2510  
Gearhart, OR 97138

- OR -

Faxed to: 503-738-9385

- OR -

Emailed to: [info@cityofgearhart.com](mailto:info@cityofgearhart.com)  
"Subject: Grant Donation Request"

*For office use only:*

Date Received: \_\_\_\_\_

Required Budget Attached: YES or NO

Date of Check: \_\_\_\_\_

Check#: \_\_\_\_\_

Amount Awarded: \_\_\_\_\_