



**COMMUNITY
FOUNDATION**

Serving Howard, Clinton and Carroll Counties

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Kokomo, Indiana 46901

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LETTER OF INQUIRY

Name of Organization	_____
Employer Identification Number	_____
Address	_____
Contact Person	_____
Telephone	_____
Email	_____
Grant request amount	_____

1. Request title (a few words)

2. Brief description of the need or opportunity for funding – the issue and the goal(s). (2-3 paragraphs should be sufficient)

3. Brief description of the specific county(ies), geography(ies) and/or population(s) to be served, and the potential impact. (1-2 paragraphs should be sufficient, and your organization could be the 'population served')

4. Estimated timeframe.

5. Total estimated cost of the need or opportunity, and the resources you have in hand toward that cost.