Mecosta County Community Foundation
Advised Funds
Application Cover Sheet

To: Mecosta County Community Foundation

Fund Name: _____

We recommend that the Mecosta County Community Foundation review and approve the following distributions from the above fund. We understand that the final decision rests with the Board of Trustees of the Fremont Area Community Foundation, whose legal responsibility it is to ensure that all distributions meet the regulations of the Internal Revenue Code and are compatible with the policies and purposes of the Fremont Area Community Foundation. We certify that these recommendations do not represent the payment of any legally enforceable pledge or obligation, and that we will not receive any goods, services, or non-tax deductible membership benefits.

_____ _____ _____
Donor Donor Date

Name and Address of Recipient Organization Suggested Amount of Grant

_____

_____

_____ $_____

Purpose of Grant_____

Name and Address of Recipient Organization Suggested Amount of Grant

_____

_____

_____ $_____

Purpose of Grant_____