

**TRUMAN HEARTLAND COMMUNITY FOUNDATION
PROPOSAL SUMMARY SHEET**

Organization _____

Address _____ **City** _____ **State** _____ **Zip** _____

Contact Person _____ **Phone** _____

Email Address: _____ **Date Submitted** _____

Name of Program Funding is being Requested for: _____

Indicate Type of Request: **Equipment:** _____ **Operational Support:** _____ **New Initiative:** _____

Amount Requested _____ **Total Program Budget** _____

Description: (Using only the space below, give a summary of your proposal. Please include: a) how this program “fits” with your organization’s mission, b) funding priority to which the program responds, and c) time frame for completion.