

LESTER A. WALKER FOUNDATION

610 North Main Street - PO Box 169

Fremont, Nebraska 68026-0169

402-753-2255

Trustees: FNBO – Amber Kerschinske (akerschinske@fnbo.com)

Mike Wiseman (gmw@wisemanlaw.com), and Jane Walker

GRANT APPLICATION

Applicant:	
ID#:	
Address:	
Executive Contact:	

General Classification of Applicant	<input type="checkbox"/> Religious <input type="checkbox"/> Health <input type="checkbox"/> Educational <input type="checkbox"/> Social & Welfare <input type="checkbox"/> Cultural <input type="checkbox"/> Other (specify)
Is Organization 501(c)(3)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Principal purpose of Organization:	
If you are affiliates with another organization, have you obtained permission to max tax application?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have taxing authority?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project that requested grant would be used for: (if additional room need, please attach)	
What is source of income for ongoing operations?	
Primary source of capital funding:	
Total cost project (estimate):	\$
Funds available and/or pledges received for this project:	\$
Amount of this request for grant:	\$
What percent is this request of the total funds required for project?	%
Fiscal year of applicant	

Date

By

THE FOLLOWING ATTACHMENTS SHALL BE SUBMITTED WITH THIS APPLICATION:

- 1) 501(C)(3) Determination Letter or Application.
- 2) Narrative description of organization's principal activities.
- 3) List of Board of Directors and Officers.
- 4) Income and expense statement for previous year's operations, present year and next year.
- 5) Such other information as you feel would be of value.