



**2019 BUDGET**

**HUMAN SERVICE ORGANIZATION FUNDING REQUEST**

**Deadline for Application: August 8, 2018**

*(FUNDING FOR IN-CITY CLIENTS/RESIDENTS/HUMAN SERVICE ORGANIZATIONS ONLY)*

**AGENCY NAME:** \_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**TIN or EIN:** \_\_\_\_\_

**DATE:** \_\_\_\_\_ **AMOUNT OF REQUEST** \_\_\_\_\_

(Payment is usually made quarterly)

1. Please provide your organization's mission statement:
  
  
  
  
  
  
  
  
  
  
2. Briefly list the activities of your request and the goals in providing this service to meet basic human needs (food, clothing, shelter):
  
  
  
  
  
  
  
  
  
  
3. How will you meet your program goals?



10. Provide a brief story on how your organization has been able to make an impact in our community.

SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_

**REQUIRED:**

Please submit a copy of your agency's most recent Annual Report with this application. If your agency does not produce an Annual Report, please submit a copy of your most recent annual budget that includes proposed and actual figures.

The Human Services Advisory Board will review the applications for funding and make recommendations to the Mayor for the budget he presents to Council.

If your organization is awarded funding it may require a representative from your organization to provide quarterly updates at City Council meetings. The information should include progress of your program and how taxpayer money is affecting your goals and outcomes.

Send to:

Maureen Burwell, City Clerk

360-615-5608

City of Enumclaw

1339 Griffin Avenue

Enumclaw, WA 98022

[mburwell@ci.enumclaw.wa.us](mailto:mburwell@ci.enumclaw.wa.us)