



# Brown County Community Foundation

96 S. Jefferson Street  
P. O. Box 191  
Nashville, Indiana 47448  
812.988.4882 tx  
812.988.0299 fax

[mflinn@browncountycommunityfoundation.org](mailto:mflinn@browncountycommunityfoundation.org)  
[www.browncountycommunityfoundation.org](http://www.browncountycommunityfoundation.org)

## 2009 Mini-Grant Accountability Requirements Statement

***This is a Contractual Agreement that shall be specifically enforceable. All of the provisions of the Contractual Agreement are important and shall be implemented in a conscientious manner.***

### Report Requirements:

I, the undersigned, in accepting a grant from the Brown County Community Foundation, Inc. agree to provide the Foundation with a written narrative, financial report and other requested information, *as requested in the 2009 Grant Accountability Report Guidelines* I receive with this agreement.

### Use of BCCF Grant Funds:

I also understand that the monies received are to be utilized for purposes outlined in my Grant Application and/or specifically restricted purposes outlined by the Foundation. If circumstances prevent our organization from completion of our project by the deadline date, I will contact the Brown County Community Foundation office and request an extension.

### Publicity Agreement:

I agree that any publicity regarding this project should include reference to the Brown County Community Foundation, Inc. as a supporting partner.

Grantee Organization Name: \_\_\_\_\_

Grantee Organization Address: \_\_\_\_\_

Amount of Brown County Community Foundation, Inc. Grant: \$ \_\_\_\_\_ awarded for:

\_\_\_\_\_

Approved by: BCCF CEO, \_\_\_\_\_ Date: \_\_\_\_\_

BCCF Grants Chair, \_\_\_\_\_ Date: \_\_\_\_\_

**Grant Accountability Report Due: 30 days after completion of project ~ failure to file a grant accountability statement will affect future funding.**

Grant Funds Received by: \_\_\_\_\_ Title: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Brown County Community Foundation  
Adopted by the Board of Trustees ~ November 28, 2005  
Revised by BCCF Staff 1-8-09

BROWN COUNTY COMMUNITY FOUNDATION INC.

**Mini-Grant Application – 2009 Small Projects**

All Brown County 501(c)3 organizations are eligible. Mini Grants will be awarded quarterly. Each grant request must not exceed \$500.00 and can be awarded only one time per calendar year. Grants will not be awarded to tax-based entities and no operating funds can be awarded.

**Please attach a copy of your agency's 501(c)3 letter.**

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Street/P.O. Box

City

Zip

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Name(s): \_\_\_\_\_ Title: \_\_\_\_\_

Mission of Organization: \_\_\_\_\_

Federal ID Number: \_\_\_\_\_

Amount of Funds Requested: \$ \_\_\_\_\_ Total Project Budget: \$ \_\_\_\_\_

If total cost is not covered by mini-grant, what will be the source of the remaining funds?

\_\_\_\_\_

Timeline of Project: From (date): \_\_\_\_\_ until (date): \_\_\_\_\_

**(Project *must be completed* within 12 months of receiving award notification.)**

**Please write a three paragraph summary, on a separate page, that describes your project/need/event; who it will assist; how many it will assist; and who will oversee the project.**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please PRINT your name: \_\_\_\_\_