

Pierce County Medical Society

PCMS Foundation
2006 Grant Request Application

The PCMS Foundation intends that grant monies be used to promote health education and support health related charitable organizations in Pierce County. Proof of non-profit status is required.

Please return this application form with accompanying information to:

PCMS Foundation, 223 Tacoma Ave South, Tacoma, WA 98402

Phone: 253-572-3666; FAX: 253-572-2470; email: pcms@pcmswa.org; www.pcmswa.org

APPLICATION DEADLINE: TO BE ANNOUNCED

Organization: _____

Contact Person: _____ Title: _____

Address: _____

Telephone: _____ FAX: _____

IRS 501(c)(3) ID#: _____

Dollar Amount Requested: \$ _____ Email address: _____

Mission/Purpose of Organization:

Please state specifically how funds will be used:

What will this accomplish for the organization:

How will receipt of the contribution be documented?

- PLEASE ATTACH:
- 1) Any additional pages as necessary to complete application
 - 2) Proof of 501(c)(3) `
 - 3) Copy of Annual Report
 - 4) Copy of Budget
 - 5) List of Funding Sources
 - 6) Any other information you deem appropriate/helpful