

The Mayors' Prayer Breakfast Of Greater Kansas City

Fund Recipient Application

Our Mission

**To emphasize morality, ethics and spirituality in business, labor, the professions
and government**

Organization

501(c)(3) EIN # _____

Also please attach latest Form 990

Applicant

Name _____

Title

Address

City _____ State _____ Zip Code _____

Telephone () _____

E-Mail _____

How do the programs or services provided by your organization align with the
Mission of the Committee for the Mayors' Prayer Breakfast?

Fund Recipient Application (continued)

What services does your organization provide that directly benefits the people of the greater Kansas City community?

If your organization is selected as the Recipient, state briefly how funds will be utilized. What added impact would be achieved with the requested grant?

Has your organization been a CMPB Funds recipient during the past three years?

Yes _____ No _____

If yes, what year? _____

If yes, how were funds utilized? (please attach)

Number of members on your Board of Directors _____

Names of Board Members (please attach)

What is the annual operating budget of your organization?

\$_____ (please attach)

What percentage of your annual budget is utilized specifically for programs and services? _____%

What percentage of your annual budget is utilized specifically for administrative cost? _____%

What is your major fund raising source?

Fund Recipient Application (continued)

List additional fund sources, if applicable.

Application must be postmarked or e-mail dated by August 15, 2017

Direct questions to: Linda Dillon Telephone (816) 863-0992

E-Mail: kccmpb@aol.com

Submitted by

Date

Mail application to:

Committee for the Mayors' Prayer Breakfast

Attn: Linda Dillon

P.O. Box 26071

Overland Park, KS 66225