



2018 PET PEEVES GRANT REQUEST

Deadline for Requests & Materials: **OCTOBER 1, 2018**

IMPORTANT: Applications submitted post deadline, with missing or outdated information or illegibly written, will be automatically disqualified from consideration.

INFORMATION	
Date Submitted	
Your Name and Title	
Organization Name	
Address	
Website	
Phone (include area code)	
E-mail	
Years in Operation	
Are you affiliated with another animal advocacy organization?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes", please state name and affiliation	
Please check that the following are attached to this request form: <input type="checkbox"/> Financials <input type="checkbox"/> 501C3 attached <input type="checkbox"/> Board of Directors List <input type="checkbox"/> 990/Tax Return (*) <input type="checkbox"/> History of largest grants/donations.	
(*) If your organization is on extension for the 990 filing, we can accept one of the following in lieu of the tax return: (1) Detailed balance sheet and income statement prepared by an accountant (2) QuickBooks or other financial software detailed balance sheet and income statement or (3) Handwritten detailed balance sheet and income statement. <i>If submitting handwritten statement, following signed statement is REQUIRED, "I declare that I have examined the attached financial statements and to the best of my knowledge and belief all information reported on the statements is true, correct and complete."</i>	
QUESTIONS	
List number of paid staff, position and salary.	
How many active volunteers do you currently have?	

Are you available for a site visit? No
 Yes Address? _____

QUESTIONS (continued)

Are you working with any other animal welfare organization(s) on this project? No Yes If "Yes" list organization(s) and address(es)

Who is responsible for the proper allocation, management and follow up for the Pet Peeves potential grant?

Name:		Title	
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PAST PET PEEVES GRANT HISTORY

Have you applied for a grant from Pet Peeves before? Yes No

Have you received a grant/assistance from Pet Peeves in the past? Yes No

Assistance Received Previously

Year(s)	Amount	Purpose

CURRENT PET PEEVES GRANT REQUEST

\$ Amount	Materials/Food	Purpose
		<input type="checkbox"/> Spay/Neuter <input type="checkbox"/> TNR <input type="checkbox"/> Food/Supplies <input type="checkbox"/> Medical <input type="checkbox"/> Pet Therapy <input type="checkbox"/> Humane Ed <input type="checkbox"/> Other (specify) _____ _____ _____

Details of request (be specific and earmark your grant for a specific number of animals or population that you would like to target and list the results that you are hoping to achieve) **(Feel free to attach estimates/photos or additional info to support your request)**

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