

James A. Duff & Owen M. Duff Memorial Trust Fund

Application for Request of Funds

PLEASE SUBMIT ORIGINAL APPLICATION, ALONG WITH 9 ADDITIONAL COPIES, TO BANK & TRUST COMPANY.

PLEASE DO NOT INCLUDE A COVER LETTER WITH YOUR APPLICATION.

Organization Information

Date of Application: _____

Legal Name of Organization Applying: _____

Year Founded: _____ Current Operating Budget: _____

Executive Director/Administrator: _____

Contact Person/Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

***** NEW APPLICANTS --Please provide IRS non-profit or tax-exempt letter of determination
***Internal Revenue Code Section 2055 and Section 501(c)(3) and successor sections**

Proposal Information

Project/Program: _____

Date(s) of the Project/Program: _____ Amount Requested: \$ _____
(Include bids & additional support if applicable.)

Purpose/Objectives: _____

Please list below additional grants, trusts, or foundation awards your organization has received over the last 3 years.

Year Awarded	Source of Funds	Purpose of Requested Funds	Amount Awarded	Remaining Funds

The James A. Duff & Owen M. Duff Memorial Trust funds are to be used **“for various charitable purposes in North and South Litchfield Townships, including – but not necessarily limited to educational purposes in LCUSD #12, benefit of the Litchfield Public Library, improvements to the Lake Lou Yaeger Park area, beautification of the city of Litchfield and the improvement and expansion of its recreational and cultural facilities, and other charitable purposes within the Litchfield community.”**

As with any Charitable Trust that award funds, a measure of accountability is expected of the organization to enjoy the benefits of those funds. The James A. Duff & Owen M. Duff Memorial Trust Fund expects that funds will be utilized for the outlined and intended project/service as quickly as possible. Confidence exists from the James A. Duff & Owen M. Duff Memorial Trust Fund that each organization awarded funds will exhibit accountability, produce results, and use the awarded funds as intended. The James A. Duff & Owen M. Duff Memorial Trust Fund Committee may request/inquire as to the status of products/projects/services funded. Future accountability may be requested by your organization.

Authorization

Executive Director/Administrator: _____ Date: _____
(Signature)

Full Name/Title of Above: _____

I certify to the best of my knowledge that the tax-exempt status of the organization is still in effect.

Submission/Notification Process

Applications are collected and packets are provided to the Trust Advisory Committee in advance of the scheduled meeting. A member(s) of the Trust Advisory Committee may contact your organization with questions/clarifications if needed.

Approximately 6 weeks after the application deadline, your organization will be notified through the mail regarding the decision made by the Trust Advisory Committee.

Please do not contact Bank & Trust Company or members of the Trust Advisory Committee about the status of your application.

Mailing/Drop Off Information

Bank & Trust Company
Trust Department
401 N. Madison
P.O. Box 410
Litchfield, IL 62056