

Application Form

Name of Organization:

Describe your community in	mprovement project:		
Who will benefit from your	project & how many individuals d	lo you estimate that to be?	1
If granted, how will the fun	ds received from NDTC be spent?	?	
	funding from NDTC for this projection		
Financial Information: Have you If so, what	Total Cost of Project: requested from other sources? amounts have been confirmed? Amount Requested from NDTC:	\$ \$ \$ \$	10
	PLEASE COMPLETE OTHER S	SIDE →	
llars in Motion Commit	tee Recommendations:	\$	

How would NDTC be recognized for the contribution?				
Date of event:				
Deadline when requested funds are needed:				
As a recipient of this donation from NDTC, and as a duly authorized representative of my organization, I certify that my organization:				
Is not-for-profit.				
 Will use the donation as indicated in the application form. 				
 Will keep complete documentation (copies of cancelled checks, invoices, receipts, etc.) that could be reviewed by a representative of NDTC upon request. 				
Printed Name: Signature:				
Name of Organization the check should be made out to should the donation be approved:				
Contact Person: Telephone Number:				
Mailing Address:				
E-Mail Address: (optional)				
Date:				
Please return completed request to:				
NDTC Dollars in Motion PO Box 180				

Devils Lake, ND 58301-0180

NDTC Donation Guidelines:

- Community must be one of the 25 served by NDTC
- Priority funding will be given to projects that benefit the largest percentage of your community members. Those projects might include: technology projects for the benefit of the community, aiding ambulance and fire districts, youth related improvement projects such as playground equipment, etc.
- See NDTC Dollars in Motion Request Guidelines brochure for further information.