

## **Grant Recommendation Form**

Form to be submitted via mail or email, and signed by an authorized advisor or representative of an existing community foundation fund.

This is a request to the Grants Committee of the Eastern Carolina Community Foundation to review and

approve the following distribution(s) from the \_\_\_\_\_\_

Organization	Address	City/State/Zip	Amount
			\$
			\$
			\$
			\$

## Total Grant Distribution Recommended:

I understand that final approval rests in the hands of the Foundation's Board of Trustees in whose charge it is to see that all distributions are within the purposes of the Eastern Carolina Community Foundation. Further, I acknowledge that this recommendation for distribution does not fulfill any legally binding pledge nor represent payment for any services received by me or members of my family.

Signature:	Date:	
Printed name:	Title:	
	For Office Use	
Payment Date		
Board Approval Date		
Notes:		_
		_

Fund.