

## El Paso County Bar Foundation Grant Application

### **El Paso County Bar Foundation Grant Application**

The El Paso County Bar Foundation was established in March 2002 as the charitable arm of the El Paso County Bar Association. The Foundation works to:

- Promote education, knowledge and awareness of the law.
- Improve the administration of justice and the delivery of legal services.
- Assist in providing legal services to those who are unable to afford them.
- Provide scholarships and grants consistent with these purposes.
- Serve similar charitable and community needs in El Paso and Teller Counties.

To apply for a grant from the El Paso County Bar Foundation, please submit the following documents:

#### **1. Summary Form**

Use the 3-page template provided. Use Times New Roman 11-point font in the space provided for responses.

#### **2. Attachments**

- a. Organizational budget, including income, expenditures, and fundraising
- b. Proof of IRS federal tax-exempt status
- c. Board of directors list
- d. Cover letter (optional)
- e. Additional information (optional): a single attachment not exceeding three pages containing any other information you would like the Grant Committee to consider

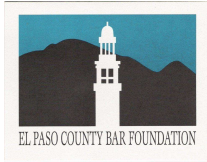
Submit completed applications by email by **5:00 pm on May 1** to:

El Paso County Bar Foundation  
Grant Committee

Email: [foundation@elpasocountybar.org](mailto:foundation@elpasocountybar.org)  
Subject Line: EPCBF Grant Application

For questions, please contact:

Anne Turner  
El Paso County Bar Foundation, Grant Committee Co-Chair  
Tel. (719) 385-5522; or [foundation@elpasocountybar.org](mailto:foundation@elpasocountybar.org)



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**SUMMARY FORM**

**Legal Name of Organization:**

**DBA (if applicable):**

**Mailing Address (and physical address if it is different and not confidential):**

**Phone:**

**Fax:**

**EIN:**

**Website:**

**Organization Email Address:**

**Name of CEO or Executive Director:**

**Phone:**

**Email:**

**Primary Contact (if different):**

**Phone:**

**Email:**

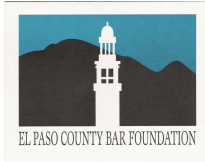
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**Organization Information**

**Year Founded:**

**Mission Statement:**

**Geographic Area Served (specific to this proposal):**



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**Tax Exemption Status:**

- 501(c)(3)
- Using a fiscal agent/fiscal sponsor:   
Name of fiscal agent/sponsor:
- Other than 501(c)(3), describe:

**Number of Employees: Full-time:**  **Part-time:**

**Grant Request Information**

**Indicate purposes that apply to your proposal (select all that apply):**

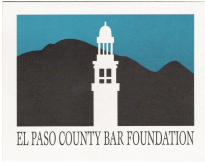
- Promote the education, knowledge and awareness of the law
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**Type of Grant Request (select one):** **Amount of Request:** \$

- General Operating Support
- Program or Project Support   
Name of Program or Project:
- Capital Request
- Other

**Describe what the grant will be used for:**

**Describe the need for the operation or project in the community:**



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### Describe how the funds will be expended:

### Describe how success will be measured:

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### Financial Information Budget numbers should match the numbers presented in Attachment 2(a)

Organization's Current Budget for Fiscal Year Ending:

\_ / \_ / \_

Income:

\$

Expenses:

\$

AND, if other than a general operating request,

Program or Project Budget:

\$

Dates: from

\_ / \_ / \_

to

\_ / \_ / \_

Income:

\$

Expenses:

\$