



## **KCBCA Nonprofit Grant Criteria Application Form**

**1. Name and Address of Organization:**

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**2. Contact Person:**

- a. Name: \_\_\_\_\_
- b. Phone Number: \_\_\_\_\_
- c. Email address: \_\_\_\_\_

**3. Amount Requested: \_\_\_\_\_**

**4. Non-Profit/Charitable Tax Code: \_\_\_\_\_**

**5. Brief Description of what \$\$ will be used for: (Grants will be awarded based on positive benefit to the community (KCB/Marathon) and should include a clear plan, timeline, budget and compliance with local regulations):**

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**Date Submitted: \_\_\_\_\_**

**Mail to: Key Colony Beach Community Association, PO Box 510884, KCB, FL 33051 or email to [ted.fischer1@verizon.net](mailto:ted.fischer1@verizon.net)**

**Date Received: \_\_\_\_\_**

**Status: \_\_\_\_\_**