

**HARRAH'S CHARITABLE FUND/NORTH KANSAS CITY  
APPLICATION FOR FUNDS**

*Circle Category That Applies to Your Organization:  
(Just circle one please)*

*Project Profile:*

Medical Services      Emergency Social Services      Social Services      School  
Service Organizations      Elderly Services      Community Services      Other

*Project Title* \_\_\_\_\_

*Amount Requested* \_\_\_\_\_

*Length of Time Project Has Operated* \_\_\_\_\_

*Committee reserves the right to change category. Those affected will be notified.*

*Proposed Starting Date if New Project* \_\_\_\_\_

**Instructions for completing application:**

Application for Harrah's Charitable Fund/North Kansas City Funding for 2009 should be submitted from 8:00 a.m., November 3, 2008, through 5:00 p.m., December 5, 2008. INCOMPLETE APPLICATIONS OR THOSE RECEIVED BEFORE NOVEMBER 3 OR AFTER DECEMBER 5 WILL NOT BE CONSIDERED. Applicants will be notified after January 31, 2009, if their request has been accepted.

**It should be understood that once an organization receives monies from the fund, it is not automatic that the organization will continue to receive those same monies (or any) from now on. The committee attempts to evaluate all applications every year.**

**IF YOUR ORGANIZATION HAS CHANGED ITS NAME IN THE PAST THREE YEARS,  
PLEASE INDICATE BELOW.**

**IMPORTANT!** You must submit a copy of your 501(c)(3) determination letter from the IRS. On this application you will list your current Board of Directors Roster, a list of the organization's officers, a copy of your mission statement with your application, and the percent of your budget used for administrative costs.

**If all of the above information is not included, your request will not be considered. Use only the forms provided.**

Agency Name \_\_\_\_\_ Date \_\_\_\_\_

Name Changes In Agency In Last Three Years \_\_\_\_\_

Federal I.D. Number \_\_\_\_\_ or Social Security No. \_\_\_\_\_

Address \_\_\_\_\_

Contact Name \_\_\_\_\_

Telephone \_\_\_\_\_ Signature of President \_\_\_\_\_

**Note: If any question is not answered on sheets provided, the application will not be considered!!**

**No attachments please!**

**PROJECT DEFINITION AND DESCRIPTION:**

List the client population, goal of the project, service boundaries, ACTUAL NUMBER OF NORTH KANSAS CITY RESIDENTS SERVED BY YOUR ORGANIZATION (these numbers could be verified by the City Clerk or Deputy City Clerk), and any other information relevant to the funding request. **All funds donated by the Harrah's Charitable Fund/North Kansas City must benefit the citizens in the corporate city limits of North Kansas City.**

**If you received monies from this fund last year, please give a description as to how those monies were used.**

**LIST CURRENT BOARD OF DIRECTORS ROSTER AND LIST OF ORGANIZATION'S OFFICERS:**

**IMPORTANT!** Have you included a copy of your 501(c)(3) determination letter from the IRS. **Your State Sales Tax Exempt Certificate is NOT the required document.** Have you listed your current Board of Directors Roster, the organization's officers, and your mission statement on your application?

**If all the above information is not included, your request will not be considered. Use only the forms provided - do not send additional information.**

Completed applications should be submitted to:

North Kansas City Council Charitable Fund  
North Kansas City City Hall  
2010 Howell Street  
North Kansas City, MO 64116

**PROJECT RATIONALE:**

Provide a justification of the project for which you are requesting funding (i.e., need, significance, uniqueness, etc.)

**MISSION STATEMENT:**