POISE FOUNDATION FISCAL SPONSORSHIP SERVICES LETTER OF INQUIRY

Send this completed form and attachments via email to Julie Motley-Williams, Fiscal Sponsor Program

Manager, <u>jmotley-williams@poisefdn.org</u>, to begin the application process.

Contact Person							
Contact's Title							
Contact's Phone #			Email Address				
Organization's Name (if applicable)			1	_	•		
Please state the type of organization	Non-profit (Y/N)	501(c)(3) (Y/N)		Individual (Y/N)		Corporation (Y/N)	Other
Do you have a current Fiscal Sponsor? (Y/N)		-		1			
Address							
City, State, Zip							
TIN/EIN#			We	b			

Project Title:

Please provide a summary description of the project. This should be no longer than ½ page.

What community needs does the project address? This should be no longer than ½ page.

Have any funders expressed interest in this project? If yes, please list who and the dollar amount if known.

POISE Foundation 1 Two Gateway Center, Suite 1700 1 603 Stanwix Street Pittsburgh, PA 15222 412-281-4967 412-562-0292 (fax) www.poisefoundation.org A Community Is Only As Strong As Its Foundation

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What geographic area will the project serve?

What is the total budget for the project? Please provide the total only on this sheet. A detailed budget should be attached.

What are the project's start and end dates?

