

Town of Lamoine  
*Application for Outside Agency Funding*  
*Submission Deadline November 30, 2007*

Organization Name	
Mailing Address	
City, State, Zip	
Contact Person	
Telephone Number(s)	
E-mail address	
Tax Identification Number	
Amount of Funding Sought (limit \$600*)	
Date of Application	

Please provide the following information (use separate sheet or submit additional materials if necessary):

1. Outline the services to be provided to the residents of Lamoine for the fiscal year (July through June) in which the funds are sought.
  
2. State the General Purpose of your organization
  
3. Outline other fundraising efforts by your organization
  
4. Please attach a copy of your organization's most recent operating budget

You may send other supporting material with this request. The Town of Lamoine makes no guarantee that any organization will be funded. The Town Meeting vote will determine which agencies will be funded at what level. All applications will be informed as to the time and location of town meeting and may send a representative to speak about the request at town meeting.

I certify that the above and attached information about my organization is true to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

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For Town of Lamoine Use Only

Date Application Received	
Application Reviewed By	

Application is  complete  incomplete  does not meet policy criteria

Application is  forwarded to Budget Committee for recommendation

Forwarded to Selectmen for inclusion in Town Meeting Warrant

Rejected (reason \_\_\_\_\_)

Recommended Funding Level: Budget Committee:

Selectmen

*\*Limit does not apply to library & recreation services*