



Letter of Interest Cover Page

Date: _____ Name of Organization: _____

Name of Project or General Support: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Person: _____ E-mail: _____ Phone: _____

Amount Requested: _____ Total Project Budget: _____ Total Organizational Budget: _____

Have you ever applied for funding from the Two West Foundation before? Yes: No:

If you received funding from the Two West Foundation:

Amount Received: _____ Date Funded: _____

Do you have 501 (c)(3) Status: Yes: No:

If no, who is your fiscal agent/sponsor? _____

Briefly describe the work for which you are requesting funding:

*Attach a copy of your final report if you have previously received funding from the Two West Foundation.