

**MARY’S PENCE**

**INITIAL FUNDING INQUIRY**

Please type or print. Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Organization name | |
| Organization website | |
| City, State and Country Where Project Takes Place |
| Name, Title, Email, and Phone Number of Contact Person |
| What is your organization/group's mission? |
| Describe the need or issue you are planning to address. (Suggested word count 100) |
| Describe the work in need of funding. (Suggested word count 150) |

Please email this completed form to Grace Gbolo at gracegbolo@maryspence.org. We will contact you with information on next steps once we have reviewed your funding inquiry.