Funding Request Form for Budget Year 2027
City of Miller

Organization Name: _____

Executive Director of Administration: _____

Name of person completing application: _____

Mailing Address _____

Telephone No. _____

Fax No. _____

Email Address _____

A brief description of the organization:

Purpose:

Background:

Number of active volunteers _____ Number of board members _____

Total amount of funds received or expected to receive in 2026: _____

A detailed description of what those funds were used for in 2026.

Total amount of funds requested for 2027: _____

A detailed description of what these funds will be used for. Please provide the number of individuals that will directly or indirectly benefit from these funds.

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Please provide a specific goal that your organization has in mind for the requested funds.
What are your organization's current sources of funding?
Your current funding request equals what percentage of your annual operations?

Do you expect this to be a single or a reoccurring request? SINGLE REOCCURRING

All non-profit organizations must provide a copy of your last year's financial statement.

All requests must include a current year operating budget.

Applicant Signature _____

Date _____

APPLICATION DEADLINE: BY 5:00 PM ON AUGUST 31, 2026.