



2020 GRANT REQUEST FORM

Name of Organization	
Purpose of Organization	
Contact Person	
Address	
Phone & Email	

TOTAL AMOUNT REQUESTED: \$ _____	
SPECIFIC ITEMS REQUESTED AND COST, in order of priority	
Description of Item	Cost

- Enter the total amount your organization is requesting
- Specifically list all individual items requested, in order of priority for your group
- Grant funds must be used during **2020** for the purpose listed above
- Please attach any additional information you want to provide to explain your request
- If you are a 501 (c) 3 organization please include your most recent Annual Report and audited financial report

THIS FORM MUST BE RECEIVED BY Monday, April 20, 2020

Please email to disbursements@lhwl.org
 mail to Carolyn Brunkenhoefer, LHWL, P.O. Box 38011, Dallas, TX 75238