

# 2014

## Request for Funds from Pathfinder Foundation, Inc.

Pathfinder Foundation  
P.O. Box 1001  
2824 Theater Avenue  
Huntington, IN 46750  
(260) 356-0500

Purpose of Request: \_\_\_\_\_  
\_\_\_\_\_

Total Cost (Please attach all supporting documentation for the amount requested):  
\_\_\_\_\_

Desired Outcome(s): \_\_\_\_\_  
\_\_\_\_\_

Other Organization's you have requested funds from if the Pathfinder Foundation does not fully fund: \_\_\_\_\_

Does your organization serve clients from Pathfinder Services, if so how many: \_\_\_\_\_

Name of fund seeker: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address (Including City, State and Zip): \_\_\_\_\_  
\_\_\_\_\_

Check Payable to: \_\_\_\_\_

Additional Information you would like the Pathfinder Foundation to be aware of:  
\_\_\_\_\_  
\_\_\_\_\_

Date Needed: \_\_\_\_\_

- *Please note you must be a 501 (c) 3 to receive funding. You must attach proof of your 501 (c) 3 status to this request. Priority funding is given to those organizations in Allen, Huntington, Marshall, Starke, Wabash and Whitley Counties.*
- *Please feel free to attach additional pages to this request if needed.*

**All forms are to be returned to the Pathfinder Foundation by Friday, March 7, 2014**