

Boiling Springs Tourism Development Authority
Funds Request Application Checklist

Organization Name: _____.
Mailing Address: _____.
Contact: _____.
Phone: _____.

Amount Requested from Travel/Tourism Grant Program: \$ _____.

Organization's Current Operating Budget: \$ _____.

What percentage of your budget is spent on activities outside the Town of Boiling Springs?
_____ %

What percentage of your budget is spent on activities for non-residents of the Town of Boiling Springs? _____ %

Please provide the following information in the order listed below:

Note: * means required. Failure to provide this information will automatically disqualify the application for this grant cycle.

- _____ 1) Application summary sheet (This sheet)*
- _____ 2) Organization narrative*
- _____ 3) Income Statement*
- _____ 4) Expense Statement*
- _____ 5) Compliance / Signature Statement*
- _____ 6) List of Officers and Directors showing terms of office*
- _____ 7) Mission Statement (if applicable)
- _____ 8) Organizational Chart (if applicable)
- _____ 9) Strategic Plan (if applicable)
- _____ 10) 501 [c] 3 Status (IRS letter)*
- _____ 11) Marketing Plan