



**REDWOOD AREA UNITED WAY
APPLICATION FOR FINANCIAL PARTICIPATION
2017 – payable 02-2018**

Name of Organization: _____	
Address: _____	
Telephone : _____	E-mail Address: _____
Local Director: _____	Telephone #: _____
Address: _____	
Is Agency Tax Exempt? _____	501©3 #: _____

2016 Disbursement of Funds

2016 Redwood Area United Way allocation : \$ _____

2016 Total Annual Budget: \$ _____

What percent was this allocation of the total budget? _____

Describe the programs supported by the allocation: _____

2017 Allocation Request (2018 Disbursements)

Your request from the Redwood Area United Way (to be received in 2018): \$ _____

What percent is the request of your entire budget? _____

Describe the programs that the funds requested will support, and mark with an asterisk

Those programs that no other agency offers: _____

What percentage of your budget will be used for administrative purposes? _____

What is your membership fee or charge for services? _____

Please describe what specific service your agency provides for a single \$25-\$50-\$100

Donation: _____

Page 2
Application for Financial Participation

What % of the requested RAUW allocation will be used in Redwood County? _____
How do you arrive at this figure? _____

Unduplicated number of persons you actually served in: Redwood____ Morton____
Wabasso____ Wanda____ Morgan____ Franklin____ Clements__ Vesta____
Sanborn____ Lamberton____ Lucan____ Milroy____ Seaforth____ Delhi____
Belview____ Revere____ Walnut Grove____ Other_____

Unduplicated number of units you actually served in: Redwood____ Morton____
Wabasso____ Wanda____ Morgan____ Franklin____ Clements____ Vesta____

Have you or do you expect to receive grants from the City, County, State or the Federal Government which are available for local expenditures? _____
If yes, please indicate amount, type and year: _____

Do you receive support from any other funding agency in Redwood County? _____
If yes, please indicate the agency, amount and year: _____

What fundraising efforts will be conducted during the next year? _____
Please list Activity, Net \$ Results, Area Covered, Month Conducted and What \$ Used for

How do you promote your United Way affiliation? _____

Is your agency audited annually by an independent auditor? _____

AGENCY:			
	F/Y 2015 _____	F/Y 2016 _____	F/Y 2017 _____
SUPPORT REVENUE & EXPENSES	LAST YEAR	THIS YEAR	NEXT YEAR
	ACTUAL	BUDGETED	PROPED
Public Support & Revenue – All Sources			
Allocation from this United Way			
Legacies & Bequests (Unrestricted)			
Contributed by Associated Organizations			
Other Contributions			
Allocated by Other United Ways			
Fees & Grants from Government Agencies			
Membership Dues			
Program Service Fees & Net Incidental Revenue			
Sales of Materials			
Investment Income			
Misc. Revenue			
TOTAL SUPPORT & REVENUE			
EXPENSES:			
Salaries			
Employee Benefits			
Payroll Taxes, etc.			
Professional Fees			
Supplies – <i>Jose Cole Circus Fees</i>			
Telephone			
Postage & Shipping			
Occupancy			
Rental & Maintenance of Equipment			
Printing & Publications			
Travel			
Conference, Conventions & Meetings			
Specific Assistance to Individuals			
Membership Dues			
Awards & Grants			
Misc.			
TOTAL EXPENSES			
Payments to Affiliated Organizations			
Board Designation for Specified Activities for Future Years			
TOTAL EXP. FOR BUDGE PERIOD FOR ALL ACTIVITIES:			
EXCESS (DEFICIT) OF TOTAL SUPPORT & REV OVER EXPENSES			
Depreciation of Buildings & Equipment			
Major Property & Equipment Acquisition (\$ _____)			

