

Name of the Grant Recipient:
Name of the Project or Program:
Requested Amount:
Priority ___ out of ___
(use only if submitting multiple requests)



Congresswoman Carolyn McCarthy
Fourth Congressional District of New York
Fiscal Year 2010 Appropriations Request Form
(See instructions on the last page)

- 1. This funding will be used to/for**
(Please fill in the rest of the sentence) (limit to one sentence)
- 2. Provide a brief description and explain the purpose of the activity or project for which funding is requested:**
(Limit: 300 words)

3. Please explain why the activity or project a valuable use of taxpayer funds?

(Limit 150 words)

4. Address/Location of the Grant Recipient:

5. Provide the name, title, phone number, and e-mail address of the highest level contact at the organization:

6. Provide the name, title, phone number, and e-mail address of the staff level contact at the organization:

7. If applicable, provide the name, title, phone number, and e-mail address of the Washington DC contact or representative:

8. Describe the organization's main activities, and whether it is public, private or a non-profit organization (501©3):

(Limit: 500 words)

9. What is the total project cost?

10. What is the total amount you are requesting?

(Please note that the Subcommittees provide only one year of funding. If your request involves more than one year of Funding, please indicate the amount you will be requesting for one year.)

11. Provide a general break down of the requested funding.

(For example: supplies \$40,000; computers \$3,000; etc.)

12. What other funding sources are contributing to this project or activity and how much is each source contributing?

13. Is the entity receiving funding for this activity from any other Federal agencies?

YES

NO

If yes, include information on the amount of funds, the years received, and the name of the Federal agency and program providing the funding:

14. Provide a brief explanation of the national significance of the project

(What specific federal responsibility does the funding of this project or activity further? Limit: 300 words):

15. Have you asked any other Congressional Office(s) for support of this project?

YES

NO

If yes, which Congressional Office(s)?

Instructions: (1) Please answer the below questions in the third person (e.g., Organization X will provide much needed services to the Fourth Congressional District. Do not use “we”, “our organization”, etc.) Please answer only the question that is asked in the word limit that is provided for each question. If necessary, you may attach one additional page to support this application. Applications with answers that exceed the word limits may not be considered for funding. (2) Please email the completed form to Georgette Perros at georgette.perros@mail.house.gov by **February 13, 2009**. Any request forms submitted after February 13, 2009 may not be considered for funding. (3) **BEFORE** sending the e-mail, please type only your organization’s name in the subject field on the e-mail. If your organization’s name is not in the subject of the email, your application will be returned. **If you have any questions, please contact Georgette at (202) 225-5516 or georgette.perros@mail.house.gov.**