

Oconee County, South Carolina

Instructions – Budget Request Form for Organizational Donations

General

This form should be filled out by organizations requesting financial assistance from Oconee County. Please contact the Oconee County Finance Department at 864-638-4235, if you need any assistance. If funding is approved in the budget, the most recent annual audited financial statements **and** a non-profit determination letter from the IRS or State will need to be provided to the Finance Office before any funds will be released.

Entering information into the form:

- **Organization Requesting Funding** – Enter the complete name of organization.
- **Form of Legal Organization** – Enter the organization type (e.g. municipality, non-profit, 501(c)(3), etc.).
- **State/Federal ID Number** – Enter the organization's tax identification number.
- **Total of this Request** – This amount is automatically entered from the Total in the Expenditure Details section.
- **One-time or Recurring** – If the funding is only to be requested for this budget, then enter "one-time". If the request will occur again, then enter "recurring".
- **Organization's Mission Statement** – Summarize of the aims and values of your organization.
- **Website** - Enter web address, if applicable.
- **Year Organization was Founded** – Enter the year the organization was founded.
- **Contact Information** – Enter the name, address, phone number, fax, and email of the contact person should further information be needed.
- **Purpose of Request** – Provide a description of why the assistance is being requested; what financial hardship will be faced; and how will this affect the community.
- **Prior Year Funding** – If prior year funding had been received, provide the amount and description of its uses.
- **Expenditure Details** – Please briefly describe each expenditure and the amount requested. The amounts will be automatically added and entered in the "Total" field.
- **Required Attachments** – Attach the most recent annual audited financial statements and if applicable, the organization's non-profit determination letter from the IRS or state to the request form. The completed form and required attachments are to be submitted electronically, if possible; otherwise, submit hardcopies of both.

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Budget Request Form for Organizational Donations

Fiscal Year 2017-2018

Organization Requesting Funding:			
Form of Legal Organization:		State/Federal ID Number:	
Total of this Request:		One-time or Recurring:	
Organization's Mission Statement			
Website:		Year Organization was Founded:	
Contact Information			
Contact Name(s):			
Organization's Mailing Address:		City, State:	Zip Code:
Phone Number:		Fax Number:	
E-mail:			
Purpose of Request			
Prior Year(s) Funding (if applicable)			
Expenditure Details			
Please provide a detail description of how funds will be spent, for example salary, supplies, equipment, capital items, etc.			
Description			Amount
Total			
REQUIRED ATTACHMENTS			
1. The most recent audited financial statements and			
2. A letter from the IRS or State proving non-profit status.			
Finance will NOT release any funds before both , a) this budget request is approved by County Council and b) the required attachments have been received.			