

## **Black-Tie Charity Ball**

Tennessee Valley, AL

www.blacktiecharityball.com

email Completed application to: sherenroberts@yahoo.com or phillisgreid@gmail.com

### **Veterans' organization financial support request form**

Black-Tie Charity Ball funds are open to any Veterans/First Responders organizations within the Tennessee Valley Communities or the affiliates of North Alabama Veterans Fraternal Organizations Coalition known as NAVFOC. The NAVFOC membership is NOT required, however it is highly recommended.

#### **(Request is NOT a guarantee to receive Black-Tie funds)**

The Black-Tie Charity Ball chairing team will review each application and will determine which organization(s) will receive funds before the annual fundraiser event has been completed. Funds WILL NOT be granted for individual request for any reason(s).

#### **Following criteria for consideration:**

1. Organization must be 501 (c) (3), a nonprofit organization.
2. Veterans/First Responders mission must be critical for the organization(s) requesting financial support.
3. Request must be submitted by 30 March each year. Black-Tie Charity Ball chairing team WILL NOT consider late submissions and WILL NOT notify organization(s) who submit late entries.
4. Request form must be correctly completed and must provide all required information by the deadline.

#### **Organization requirements:**

5. Organization must send a representative to present the organization's mission at the annual Black-Tie Charity Ball receiving year.
6. Organization will be required to make a comprehensive report the following year at the annual Black-Tie Charity Ball event. Describe how the Black-Tie funds were disbursed.
7. Receiving organization(s) WILL BE required to sign funds commitment on how the funds will be disbursed prior to issuing of the Black-Tie funds.
8. Organization must advertise the event. (Social Media, Website.....)

#### **The following information will be submitted for consideration:**

Name of Requesting Organization: \_\_\_\_\_

NAVFOC member? Yes or No (please circle one)

Previous year organization's income/donations received: \_\_\_\_\_

Previous year total expenses for the Veterans program(s): \_\_\_\_\_

Number of paid staff working in the organization: \_\_\_\_\_

Number of volunteers working in the organization: \_\_\_\_\_

Total annual salaries for employees working for the organization: \_\_\_\_\_

Will the Black-Tie Charity Ball funds be used to pay any employee salaries? **Yes** \_\_\_\_  
**No** \_\_\_\_ (If yes, what percentage of funds will be used to pay salary?) \_\_\_\_\_

Please explain how the Black-Tie Funds will be used if granted (no more than 150 words)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How will Soldiers, DA Civilians, Veterans or their Families benefit from the Black-Tie funds? (no more than 300 words please): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are other organizations supporting your organization? \_\_\_\_\_

\_\_\_\_\_

If approved for receiving funds will the organization send a representative(s) to present the organization's mission at the Black-Tie Charity Ball? Yes \_\_\_\_ No \_\_\_\_  
If yes, how many people will attend? \_\_\_\_\_

Who can provide additional information about your organization if needed?

**Name:** \_\_\_\_\_  
**Title:** \_\_\_\_\_  
**Cell #:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

\_\_\_\_\_  
**Signature and Title of Requester**

\_\_\_\_\_  
**Date Request Submitted**