**RICHARD LOUNSBERY FOUNDATION**

**Proposal Administration Form**

**PROPOSAL ADMINISTRATION FORM**

Please complete and sign this form.

**Applying Organization**

(Universities: specify if applying organization is a supporting foundation)

Legal Name: (Will be Grantee Organization if funded)

Address Line 1:

Address Line 2:

City, State, Zip:

U.S. Tax ID (EIN#):

Tax Status:

Country:

Phone:

Email:

**Required Documents**

**U.S. Organizations** (Universities are not required to submit these documents)

Tax‐exempt determination letter from the IRS.

**Non‐U.S. Organizations:** If a grant is approved, non-U.S. organizations will need to sign an Expenditure Responsibility Agreement and report on an annual basis for tax purposes.

\*\*Upon receiving the signed Expenditure Responsibility Agreement, the Foundation will seek wire instructions.\*\*

**Project Director/Principal Investigator Co‐ Project Director/Principal Investigator** (If applicable)

Name:

Title:

Organization:

Department:

Address Line 1:

Address Line 2:

City, State, Zip:

Country:

Work Phone:

Mobile Phone:

Email:

**Additional Contact Admin/Financial Officer responsible for financial reporting (if different)**

Name:

Title:

Organization:

Department:

Address Line 1:

Address Line 2:

City, State, Zip:

Country:

Work Phone:

Email:

**Payment Address** (This information will only be used if your project is funded)

Org Name: (must be same as Applying Org) Payee Contact:

Department:

Work Phone:

Address Line 1:

Email:

Address Line 2:

City, State, Zip:

Country:

**Form Completed by:**

Name: Title:

(Print name)

Signature:

Date: