



Battle Creek **Community** Foundation

**COMMUNITY PROJECT FUNDS**

**-CONTACT INFORMATION-**

*If you have changes in contact information for your community project fund, please complete this form and return to the Battle Creek Community Foundation. Please provide Committee minutes documenting any contact changes, including **fund representatives, persons designated to authorize expenditure requests** and committee members. Thank you.*

**Name of Community Project Fund:** \_\_\_\_\_

**Website:** \_\_\_\_\_

Fund Req  
Rep Form  
(✓ all (✓ all  
that that  
apply) apply)

**Primary Contact:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

*For good. For ever. For all.*