

LACLEDE GAS CHARITABLE TRUST

Grant Application

Note: Contributions are restricted to

- **501(c)(3) organizations (no contributions to individuals),**
- **within Laclede Gas Company's service area, and**
- **organizations *other than* political, labor, fraternal or religious organizations or civic clubs; K-8 educational institutions (public or private) or school-related events or clubs; and endowment or memorial funds.**

Attachments to be provided with application:

- **Most recently filed Form 990 and audited financial statements**
- **Current year's budget**
- **List of board members and executive officers**
- **IRS letter granting 501(c)(3) status**
- **Budget for project/program/event**
- **List of current corporate contributors**

Organization to be Funded:

Organization name:

Legal name registered with IRS: (if different from organization name)

Other name organization is known as:

Address:

General phone number:

General fax number:

General e-mail address:

Website URL:

Federal employer identification number (EIN):

Is the organization a United Way member?

Tell us about the organization: (Please limit your response to 200 words)

Organization's primary focus area: Education
(Circle one) Arts & Culture
Civic & Community
Health & Human Services

Does any director or executive officer of The Laclede Group or Laclede Gas Company, or an immediate family member of either such person, serve as a director or executive officer of the organization? If yes, please identify.

Contact Information:

Executive director or president of organization:

Phone number:

Fax number:

E-mail address:

Contact person submitting this event request:

Name:

Title or relation to organization:

Phone number:

Fax number:

E-mail address:

Project/Program/Event Information and Narrative:

Date of this request:

Amount requested for project/program/event:

Project/program/event name or title: (Please limit to 20 words or less)

Project/program/event description, including reasons for project/program/event, how funds will be used, areas that will be benefited by support, plans for execution or implementation of program/project and its objectives, and current funding status:

(Please limit to 300 words or less)

Event date and/or time frame for project/program:

If event, amount of requested amount to be used for costs of event:

Submit application with attachments to:

Laclede Gas Charitable Trust

Grant Applications

720 Olive Street, Room 1517

St. Louis, MO 63101