

# The Otto Legacy Fund

(an outreach fund of)

**Meridian Street United Methodist Church**  
**5500 North Meridian Street**  
**Indianapolis, Indiana 46208**

**Telephone- 317-253-3237**  
**E-mail dotto@msumc.org**

*Tell us about your organization. Fill in the application as you are able and add any information you think would be useful. You may use additional pages if necessary to answer some questions.*

A. Requesting Entity \_\_\_\_\_

Is a recent financial audit available? \_\_\_\_\_ If so, please provide.

Please attach your most recent year-end financial statements if audit statements are not available.

Contact Person(s) \_\_\_\_\_ & \_\_\_\_\_

Telephone Number(s) \_\_\_\_\_ / \_\_\_\_\_

Email Address \_\_\_\_\_ Fax Number \_\_\_\_\_

Please attach a list of Board members if your organization has a Board of Directors.

B. What is your organization's purpose or mission? \_\_\_\_\_

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C. Describe the purpose for which funding is requested. Please be specific about the use of the funds. \_\_\_\_\_

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D. What are the total funds required for this project? \_\_\_\_\_

1. Who funds your outreach? \_\_\_\_\_

2. What is the total amount of funds requested from MSUMC? \_\_\_\_\_

3. When are the total funds needed? \_\_\_\_\_

4. From which Meridian Street committee and for what project did you last receive funds? \_\_\_\_\_

\_\_\_\_\_

5. What other organizations have you approached, or do you plan to approach, for funding? \_\_\_\_\_

\_\_\_\_\_

6. Who else has committed funds for this project? \_\_\_\_\_

\_\_\_\_\_

7. Does your organization also fund this project? \_\_\_\_\_ In what amount? \_\_\_\_\_

\_\_\_\_\_

8. Please attach a copy of the budget for this project.

E. Does MSUMC presently provide volunteers to this project or program? \_\_\_\_\_

Is there a need for MSUMC volunteers and, if so, in what capacity? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

F. Do you expect further requests to MSUMC? When? \_\_\_\_\_

Amount? \_\_\_\_\_ Purpose? \_\_\_\_\_

G. Will you place MSUMC on your mailing list for newsletters and annual reports? \_\_\_\_\_

H. If available, please provide the annual reports for the past two years.

I. Please attach your federal income tax exemption certificate.

J. Are there special circumstances of which we should be aware? \_\_\_\_\_

\_\_\_\_\_

Signature of Officer of Requesting Entity \_\_\_\_\_

Title \_\_\_\_\_

Printed Name and Title of Officer \_\_\_\_\_

Phone Number Work \_\_\_\_\_ Cell \_\_\_\_\_

Date \_\_\_\_\_

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(for MSUMC Use)

Budget \_\_\_\_\_ Annual Report. \_\_\_\_\_ Tax Exemption Cert. \_\_\_\_\_