

Organization Information
Organization Name
Mailing Address
Telephone/Fax Number(s)/email address
Name of Contact Person for correspondence.
Background Information
How long has the organization been operating?
What other projects have you managed and are you currently managing?
Who are the communities or people you benefit?
Project Details
Project Name
Summary of the proposed project



What are the principal objectives or outcome of the project?
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Where will the project be located?
What are the benefits for the community?
Who are the principal beneficiaries?
How many people will be affected by the project?
What other covers of assistance are as may be involved?
What other sources of assistance are, or may be, involved? Government
Local
State
Federal
Philanthropic Trusts
Other companies (please provide names and amounts)



What contribution is the community (or people involved) making towards the project?
What is the timetable for implementation of the project?
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Management
List the key members of your organization's executive management and Board
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How will the project be managed and by whom?
How will the project be managed and by whom?
How will ARPA or ARPA members be acknowledged for their support?



Financial Management

ARPA or ARPA members do not typically donate money to charitable programs or community projects. Our preference is to donate concrete, asphalt, or other construction materials to approved projects or programs to reduce the overall costs to your organization.

	YES	NO		
Is money being sought from ARPA or ARPA members? If yes, how much.				
Are construction materials (concrete, asphalt, or aggregates) being sought from ARPA or ARPA members? If yes, please detail your needs				
Links to our member companies More requests for assistance are received each year than there is available. When deciding which requests to aid, ARPA will give priority consideration to organizations and projects which are associated with communities in which our member operations are located, or that deal with issues identified as priorities to ARPA or ARPA members.				
	YES	NO		
Is the project linked in any way to a community where our member companies operate?				
Please name the ARPA company closest to your community.				
	YES	NO		
Are any ARPA or ARPA member employees involved in any way with the project? Please attach a list names and titles.				
	YES	NO		
Will there be opportunities for ARPA or ARPA member employees to be involved in any way with the project? Please specify how they would be involved.				



Income Tax Status.

	YES	NO
Is your organization approved for 501c3 tax deductible contributions?		
What is your organization's tax identification number?		

Backup Materials

If your funding request is seen as being of interest to us, we will seek specific additional backup materials. Please **feel free to** send backup materials such as videos, sound cassettes, photos or documents, but keep in mind that we cannot guarantee their safe return.

Submitting Application

Please send your application to:

Mr. Steve Trussell Arizona Rock Products Association 916 West Adams Street Suite 1 Phoenix, AZ 85007 steve@azrockproducts.org