



*Living Our Values · Creating Unique Solutions · Supporting Customer Success*

The Suter Company 100<sup>th</sup> Anniversary Community Enrichment Grant: Cover Page

**Organization Name**

**Contact Name**

**Address**

**City, State, Zip**

**Phone**

**E-mail Address**

**EIN Number**

**Has your organization ever received funding from The Suter Company before?**

**Project Name**

**Brief description of your project**

**Area of interest**

**Total cost of project**



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**Grant amount requested (not to exceed \$25,000)**

**Approximately how many DeKalb County residents will benefit from this project?**

**Terms of the grant:** The organization receiving this grant (“Recipient”) is obligated to use the money for the intended purpose. If the grant funds are not used for the intended purpose, the Recipient must return the grant money in full to The Suter Company. If the money is returned as required, the Recipient is eligible to submit another application at a future date. For each grant awarded, the Recipient must file a Grant Follow-Up Report after the funds are disbursed, by the date indicated in the letter notifying the Recipient of the award. By signing my name below, I hereby affirm that all the information provided by me is true and correct to the best of my knowledge.

**Signature**

**Date**