

### Grant Recommendation Form

Date: \_\_\_\_\_

I suggest distribution(s) from the \_\_\_\_\_ to the following organization(s) in the amount(s) listed:

1. Organization's official name		<b>Have you recommended a grant to this organization before?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No (If "Yes," then skip to #4.)	
		Attn:	
2. Organization's mailing address			
3. City	State	Zip	Phone (if available)
4. Amount of grant \$	5. Special instructions or purpose (e.g., for operating expenses)		

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4. Amount of grant \$	5. Special instructions or purpose (e.g., for operating expenses)		

Providing complete organizational information will speed your requests. Upon receipt, the Foundation normally processes grant recommendations and makes payments within fifteen business days.

Please:  Note that I/we choose to remain anonymous to the grant recipient(s).  
 Note that I/we choose the fund name to remain anonymous to the grant recipient(s).

I certify that the above suggestion(s) does not represent the payment of any irrevocable or legally binding pledge or other financial obligation, nor does the undersigned or any family member, fund advisor or related party expect any personal benefit from this charitable distribution. I also acknowledge the above suggestion(s) must receive approval of the Board of Directors of Kern Community Foundation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Phone Number

3300 Truxtun Avenue, Suite 220, Bakersfield, CA 93301 (661) 325-5346 Fax (661) 325.5358  
Email: danette @kernfoundation.org

KCF use only: Fund ID: _____			
Approved By: _____	Date: _____	Approved By: _____	Date: _____