

County of Cumberland, Virginia
External Organization Funding Request Application
Fiscal Year: 2027 (July 1, 2026 - June 30, 2027)

Legal name of organization:

(Should be the same as IRS publication letter and supplied on IRS Form 990)

Address:

City/State/Zip:

Phone #:

Fax #:

Email address:

Officer's Names:

Titles:

Phone #:

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External Auditor:

Address:

Phone #:

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Funded services will be provided: Regionally ____ in Cumberland Cty ____

Duration of Support: One-time ____ 2-3 years ____ Ongoing ____

Organization's fiscal year: (e.g., July 1 - June 30)

Number of Clients Served:

Time frame:

July 1, 2025 - today

July 1, 2024 - June 30, 2025

July 1, 2023- June 30, 2024

Total Clients Served:

of Cumberland
County Citizens Served:

Organization's Total Operating Budget:

FY 2027 Funding Request from Cumberland County: \$

County of Cumberland, Virginia
External Organization Funding Request Application, continued

If additional space is needed, please include additional pages. Referencing additional material or documentation will not be accepted.

Please define your organization's mission.

Please provide a description of the programs and/or scope of services you offer or intend to offer the citizens of Cumberland County.

Please provide a detailed breakdown of how the requested funds from Cumberland County will be used.

If your request for funds exceeds your request from last fiscal year, please give a detailed explanation for the requested increase.

What additional funds are you requesting from other localities, state funds, private donations, etc? *(This should also be included in your total operating budget)*

What will the impact be on your organization and the citizens of Cumberland County if funding is denied or is less than requested?