



## Ohio Historical Records Advisory Board Grant Summary Page

### Organization

Name \_\_\_\_\_

Address \_\_\_\_\_

City/Zip \_\_\_\_\_

FEIN # \_\_\_\_\_

DUNS # \_\_\_\_\_

### Funding required for project

Grant \$ \_\_\_\_\_

Matching \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

### Project Director

Name/Title \_\_\_\_\_

Address \_\_\_\_\_

City/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

### Authorizing Official

Name/Title \_\_\_\_\_

Address \_\_\_\_\_

City/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

### Authorizing Official Signature

Sign here! → \_\_\_\_\_

### Project description

Title of Project \_\_\_\_\_

Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_

**Summary Statement** *Briefly summarize the nature and purpose of the project you propose for funding. State the programmatic and financial need.*

## CHECKLIST

*This checklist is designed to assist you in the preparation of your application. Do not submit with your final application*

*Did you...*

1. Read Grant Guidelines (pp. 1-7)? \_\_\_\_\_
2. Read Grant Application Instructions (pp. 8-11)? \_\_\_\_\_
3. Complete Grant Summary Page (p. 12)? \_\_\_\_\_
4. Sign the form (p. 12)? \_\_\_\_\_
5. Complete Budget Form? \_\_\_\_\_
6. Attach Grant Application Narrative? \_\_\_\_\_

Questions? Contact: Ron Davidson  
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