



## Ohio Historical Records Advisory Board 2015 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. 1-5)? \_\_\_\_\_
2. Read Grant Application Instructions (pp. 7-9)? \_\_\_\_\_
3. Complete Grant Summary Page (p. 10)? \_\_\_\_\_
4. Sign the form (p. 10)? \_\_\_\_\_
5. Complete Budget Form? \_\_\_\_\_
6. Attach Grant Application Narrative? \_\_\_\_\_

Questions? Contact: Ron Davidson  
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