

Date:	
Name of organization or community group	
Contact Person:	
Contact (Please fill in at least one method of	contact):
E-mail:	_ Phone:
Overview of the initiative/project/program (Please describe briefly – limit of 250 words)	
Who will be served by this initiative/project/	program?
How will you measure impact – success?	
Are other funding sources being used or con	sidered for this? If so, please identify:
Estimated budget for the initiative/project/p	rogram:
Amount requested from the Foundation:	
Send your Letter of Interest by e-mail to ekf	board@gmail.com or by post to EKF Board,

Box 29, Almonte ON, K0A 1A0.