

**PY 2019-2020 CDBG PUBLIC SERVICES  
REQUEST FOR FUNDING**

**PROPOSAL ABSTRACT**

Agency Name			
Agency Address			
Director's Name	E-Mail Address		
Project Name			
Contact's Name			
Contact's Address			
Phone Number	Fax Number		
E-Mail Address		Web Page Address	
DCHD Service Category		Target Population	
# total clients for project/ # DCHD clients for project		Project ("New" = not currently in operation)	New    Existing
Number of Years <i>Agency</i> has been funded by DCHD		Number of years <i>Project</i> has been funded by DCHD to date	
Amount Requested:		Total Project Budget:	

**Project Summary:**

Describe the proposed project. Please note that this summary will be used to describe your project in official City documents.

**Budget Summary:**

Describe the *budget* for the project and *show how the budget relates* to the requested funding.

I certify that I am authorized to sign legal documents on behalf of this organization.  
I certify that the information contained in this funding application is true and correct.

Signature and Printed Name	Title	Date