

Application for the Request for the Lee County Tax Funds Providing Social Services for Senior Citizens

As required by Lee County, the Agency/Applicant hereby certifies that it does maintain an office that provides social services for senior citizens.

Name of Agency/Applicant

Primary Contact

Address

Telephone

Email

Projected Budget

Reserve Funds

Yearly Income

people they provide services

Yearly Expenditures

Amount Received Last Year

Request of Funding

Please accompany this application with a summary of programs/services provided, latest financial statement and rationale for request.

(FOR DEPARTMENT USE)

Approved Amount

Lee County Finance Chairman

Date