



FISCAL YEAR 2025 MINI-GRANT APPLICATION

Please complete the following information.

Date of application:	
Name of individual preparing this request:	
Name of person to contact regarding this request:	
Organization:	
Mailing address:	
Phone number:	
E-mail:	
Total cost of project:	\$
Amount requested from the Alaska Food Coalition:	\$
If successful, checks should be made payable to --- ?	

Please return by mail, email or fax:

Ron Meehan
 c/o Food Bank of Alaska
 2192 Viking Dr
 Anchorage, AK 99501
 Email: rmeehan@foodbankofalaska.org

THE DEADLINE FOR APPLICATIONS IS FRIDAY, October 25th, 2024

Please review the grant application guidelines before completing your application.

