

CITY OF KEIZER BUDGET REQUEST FORM FISCAL YEAR 2024-25



MUST BE SUBMITTED BY FRIDAY APRIL 26, 2024

Name of Organization:

Street address:

Street address line 2:

City:

State:

Zip code:

Contact Person

First name:

Last name:

Phone number:

E-mail:

Is your organization a non-profit or public tax-exempt organization as defined under Section 501(c) of the Internal Revenue Code?

Yes

No

Date of Request:

When do you need to receive the funds or item?

Amount requested for Fiscal Year 2024-25

Amount received in Fiscal Year 2023-24

If your organization received funds in the previous fiscal year please explain how these funds were used and what was the impact.

Describe the project, program or item(s) to be purchased: Include the following: Description of the need and how this benefits a public purpose. Please identify all entities/partners involved. Provide any information you feel necessary.

Future Cost and Maintenance: Are there additional future costs related to this project beyond the current fiscal year? If so, how will those costs be addressed? Is there future maintenance issues associated with this project? If so, how will they be handled?

Impact of Partial Funding, Delay or Denial: Is partial purchase/implementation possible? Impact? What if the funding is denied or postponed until next budget cycle? Impact?

Submit completed form to Tim Wood at woodt@keizer.org or 930 Chemawa Rd NE, Keizer OR 97303.