



THE FARM
CREDIT SYSTEM
FOUNDATION, INC.

Douglas D. Sims Fund for Rural Leadership Contribution Request Form

CONTACT INFORMATION

Contact Name: _____

Organization Name (if applicable): _____

Address: _____

City, State & ZIP code: _____

E-mail address: _____

Phone Number: _____ Fax Number: _____

PROGRAM INFORMATION

Name or Title of Program: _____

Program Description: _____

Program Objectives: _____

How the program will foster leadership skills in rural America: _____

CONTRIBUTION REQUEST INFORMATION

Amount Requested from FCS Foundation: _____

Intended use of contribution: _____

Number of persons expected to benefit from this contribution: _____

History (if any) of past FCS Foundation contributions: _____

Names of other contributing organizations: _____

Description of how the Foundation will be recognized for its contribution: _____

APPLICATION SUBMISSION

Please return this completed application form to:

John Hays
Vice President -- National Programs
FCS Foundation
50 F Street NW, Suite 900
Washington, DC 20001

or Fax to: 202-626-8718

If you have any questions about this form, contact John Hays at the FCS Foundation at:

Phone: 202-879-0853
E-mail: hays@fccouncil.com