

Grant Recommendation Form

Date:	
To: Community Foundation for Northern Virginia	
Attn: Gabrielle Webster 3201 Jermantown Road, Suite 660	
Fairfax, VA 22030	
Tulliux, VA 22030	
Re: Grant recommendation from the	
Pursuant to the terms of the	which has been established with the
Community Foundation for Northern Virginia, I hereby re	
following amount(s) to the following organization(s):	
Organization Namo:	
Organization Name:	
Contact Person:	
Address:	
City, State, Zip:	
Grant Amount:	
Additional Notes:	
☐ Check here to also recommend a grant in the amount Fund to support the work of the Community Foundation	t of □\$500 □\$1,000 or □\$2,500 or \$ from your for Northern Virginia.
I understand that this is a recommendation only, and no	t a direction.
any donor advisor, member of an advisory committee, o represent to the Community Foundation that no grantee any donor, donor advisor, member of an advisory comm Furthermore, I represent that no donor, donor advisor, ror companies we control have received or are reasonable.	e designated in this grant request is owned or controlled by
(Signature)	(Signature)
(Print Name)	(Print Name)
Email address for grant confirmation:	
Phone number of Fund contact:	

Please complete and fax this form to the attention of Gabrielle Webster, 703-879-7644 (fax), or mail completed form to the Community Foundation for Northern Virginia, Attention: Gabrielle Webster, 3201 Jermantown Rd, Suite 660, Fairfax, VA 22030. Contact Gabrielle with any questions at Gabrielle.Webster@cfnova.org or 703-374-7419.