

Request for Funds from Pathfinder Foundation, Inc.

Pathfinder Foundation
P.O. Box 1001
1152 East State Street
Huntington, IN 46750
(260) 356-0500

Purpose of Request: _____

Total Cost: _____

Desired Outcome(s): _____

Name of fund seeker: _____

Contact Person: _____

Address (Including City, State and Zip): _____

Check Payable to: _____

Additional Information you would like the Pathfinder Foundation to be aware of:

Date Needed: _____

Results: _____