

Clear Channel Toledo Time Grant Application

PURPOSE

To provide advertising time to qualified charitable organizations (within the meaning of Section 501(c)3 of the Code) which promote the betterment of the communities in Toledo and Northwest Ohio.

AGENCY

Name: _____

Address: _____

Phone Number: _____

Contact Person: _____

Purpose of Request: _____

THE FOLLOWING MUST BE INCLUDED WITH THIS REQUEST:

- One page narrative describing the use of the advertising time
- Copy of 501(c)3 Certificate
- Time Line for use of Grant (must be used during calendar year 2008)
- List of Board Members

Signature of Executive Officer of 501(c)3 _____

INTERNAL USE ONLY

Date Received: _____ Date Reviewed: _____

Disposition: Granted _____ Not Granted _____ Other _____

Explanation: _____
