



Donate or Spend & Help Our Best Friends!
PROJECT ANIMAL WELFARE (PAW) APPLICATION

INSTRUCTIONS

- 1. Please complete and sign this form. Return it with a copy of your 501(c)(3) determination letter and veterinary letter of reference to: St. Paws Thrift Store, 3275 E. Platte Ave, Unit E, Colorado Springs CO 80909. Applications without 501(c)(3) proof and veterinary letter of reference will not be accepted.
2. Provide any brochures or other printed material that help describe your organization and its mission with the completed application.
3. Call 719.597.DOGS (3647) for more information.

CONTACT INFORMATION

Organization Name:
Website:
Street Address:
City: State: Zip Code:
Mailing Address (Street, City, State, and Zip Code), if different from above:
Email:
Phone(s): Fax:
Contact Person Name and Title:
Contact Address (Street, City, State, and Zip Code), if different from above:
Contact Email:
Contact Phone(s):

ORGANIZATION INFORMATION

Date Organized: Date & Place of Incorporation:
Tax Exempt and/or EIN Number:
Number of Volunteers: Number of Compensated Members:
Name(s), Title(s) and Amount(s) Compensated:

How many animals did your organization rescue in the past year?
How many animals now in your care will directly benefit from a PAW award?

List organization's governing body (names of officers and titles):

Briefly describe your organization's history, purpose, mission, goals and accomplishments:

Briefly list your organization's wish list, with your most urgent needs first.
(This section will help St. Paws determine your organization's ranking on PAW award priority list.)

Specifically, how will your PAW award be used (for example, food, vet bills, facility improvement, etc.):

I acknowledge that any funds from St. Paws are solely for the care, feeding and maintenance of the animals, and not for personal use.

Signed: _____ Title: _____ Date: _____