**DUE AUGUST 1** *Date application submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**MONTANA BEEF COUNCIL PROJECT FUNDING REQUEST FORM**

**Strategic Priorities met through this project:** *(Select all that apply)* **FOR INTERNAL USE ONLY:**

Connect and communicate directly with consumers **Committee:**

Research and communicate beef’s nutritional benefits Education

Engage beef advocates Promotion

(International only) Promote unique attributes of U.S. beef Research

Protect beef’s image Producer Communication

Communicate checkoff programs with investors

**Business Name: Primary Contact:**

**Address, City, State, Zip:**

**Phone:**  **E-mail:**

**Describe the organization’s purpose and its primary activities/services:**

**Indicate the geographical area served:**

**Project/Event Name:**

**Project/Event activation date(s):**  **Single Multiple**

**Checkoff dollar amount requested:**

**Target audience and number to be reached:**

**Description:**

**Is there an opportunity for a member of MBC to participate or make a presentation?**

**Yes No**

**Is this an annual project/event and if so, is future funding likely to be requested?**

**Yes No**

**Describe how the project will be evaluated:**

**Please enclose the following information:**

* Board of Directors of your organization
* Itemized budget for the project/event
* Current annual operating budget
* Current audited financial report

**Return completed form to:**

Mail: Montana Beef Council, PO Box 80865, Billings, MT 59108

Fax: (406) 656-3337

E-mail: info@montanabeefcouncil.org **Questions? Call (406) 656-3336**