



## **PACIFIC FOUNDATION FOR MEDICAL CARE**

3033 Cleveland Avenue, Suite 104  
Santa Rosa, CA 95403

### **GUIDELINES FOR FUNDING**

#### **PROPOSALS**

The Pacific Foundation for Medical Care (PFMC) will consider requests for grants for the purpose of supporting projects that will enhance the availability or quality of health services for the people of the counties that PFMC serves. Evaluation of the merit of projects, prioritization, and value setting and duration of support deemed worthwhile will be the exclusive decision of the grant committee and the Trustees of the Foundation.

Periodically the Trustees will evaluate the guidelines for awarding grants and the application procedures to assure that they are timely and support the needs of the community. PFMC acknowledges its limitations, and that philanthropy alone cannot solve the problems faced by our counties. Therefore, PFMC will endeavor to join in partnerships with various entities to address community needs and concerns. Priority will be given to projects that maximize the population served, and can show other sources of support, as well as adequate planning for continuation as a self-sustaining entity.

PFMC will consider all proposals submitted, and funding decisions will be based on listed criteria and availability of funding. All grants will be for one year subject to renewal. PFMC will consider grant renewals, but they will never be automatic. Adequate analysis and reporting of results will be expected. Long-term operating support for organizations is unlikely.

#### **GRANT CYCLE AND DEADLINES**

It is the intent of the PFMC Board that grants will be awarded twice per year. Therefore grant proposals will be due by April 2 and October 1 for each grant cycle. The proposals will be reviewed by staff and presented to the grant committee prior to the June and December board meetings, where the final funding decisions will be made. It is understood that funding decisions may be deferred by the board if further information is necessary.



## PACIFIC FOUNDATION FOR MEDICAL CARE

3033 Cleveland Avenue, Suite 104  
Santa Rosa, CA 95403

### HOW TO APPLY

PFMC accepts letters of inquiry and proposals for assistance during two grant cycles with deadlines of April 2 and October 1. Kathy Pass is available to assist with questions on guidelines and application requirements at 800-548-7677, Ext. 115, or by email at [kpass@rhs.org](mailto:kpass@rhs.org). A full proposal includes the following:

**Cover letter.** Identifies the applying organization and summarizes the proposal, the need being addressed, the total cost of the proposed activity or endeavor, and the amount requested from PFMC.

**Proposal.** Describes your organization's history, current programs, key leadership, and major funding resources. Documents the need being addressed. Specifies the proposal's strategy, staff requirements, timeline, and evaluation criteria. Details the proposed budget, including current and anticipated revenue sources and amounts.

**Board endorsement.** A letter signed by an officer of your board of directors, stating that the proposal is submitted with the board's support.

**Tax status.** Description of status of organization (taxable or tax exempt). If tax exempt, submit a copy of the original federal tax exemption letter. If taxable, submit a copy of the Articles of Incorporation or other document describing the intended purpose of the organization. (No grants or awards will be considered or given to for-profit entities.)

**Financial statements.** Audited financial statements and management letters for the last three fiscal years. If your organization has annual revenues under \$250,000 and no audited statements, in-house statements verified and signed by two officers of your board of directors are acceptable.

**Current operating budget for your organization.** A statement of your organization's current operating budget.

**Funding sources for the organization.** A list of funding sources and amounts for your organization as a whole for the most recently completed fiscal year.

**Government sources of funding.** A breakdown of government sources of funding for your organization's most recently completed fiscal year. For each source, identify the amount that is allocated to general support versus amount specified for project support.

**Board of directors roster.** Include board office held, occupation and address.



## **PACIFIC FOUNDATION FOR MEDICAL CARE**

3033 Cleveland Avenue, Suite 104  
Santa Rosa, CA 95403

### **WHERE TO APPLY**

Applications should be sent to:

John W. Nacol, CEO  
Pacific Foundation for Medical Care  
3033 Cleveland Avenue, Suite 104  
Santa Rosa, California 95403

### **NEXT STEPS**

Inquiries and proposals will be acknowledged promptly. You will be notified if additional information is needed or if your project is unlikely to be funded.

For proposals that pass initial screening, the Grants and Awards Committee will meet after April and October of each year to consider applications. Recommendations for funding will be presented to the Board of Trustees at their June and December meetings, and notification and approved funding will be awarded following their approval.