

**Application for Grant from Gordon Good Samaritan Fund – 2018**

|   |                              |
|---|------------------------------|
| Date of Application   | PLEASE TYPE or PRINT LEGIBLY |
| Name  |                              |
| Date of Birth   |                              |
| Address   |                              |
| Phone   |                              |
| Email   |                              |
| Description of Need   |                              |
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| Amount Requested  |                              |
| Have you applied for or received a grant for this need from somewhere else? If so, please describe. |                              |
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Please attach the following documents:

1. A letter of reference from a social worker, case worker, clergy person, etc. who knows the applicant and can vouch for the need and the financial hardship of the applicant. Letter should be written on institution or department letterhead.
2. Documentation of the estimated cost of this request such as a bill, a bid, a quote for work, etc.
3. Documentation of financial need via first page of federal or state tax return from previous year.

*All applications will be kept strictly confidential. **Applications are due May 15.** Questions should be directed to: [goodsamaritanfund@fplex.org](mailto:goodsamaritanfund@fplex.org) Completed applications should be mailed to:*

Good Samaritan Fund  
 Attention: Chair, Social Action Committee  
 First Parish Church of Lexington  
 7 Harrington Road  
 Lexington, MA 02421

