

Organization Name	Your name								
Your email address	Your phone number								
Designated voting member (proxies may be appointed if this person unable to attend)									
<p>I certify that this organization meets GPP membership criteria:</p> <p><input type="checkbox"/> We provide at least \$50,000 in funding to at least two nonprofits operating in Greenville Co., SC</p> <p><input type="checkbox"/> Our core interest in joining GPP is to improve the quality of our investments and work in the community</p> <p><input type="checkbox"/> We are committed to working with other members to improve the quality of life in Greenville County, SC</p> <p><input type="checkbox"/> We will abide by the non-solicitation policy as stated in the full membership guidelines and agree to use good judgement regarding the confidentiality of issues discussed with individual members and among the whole membership</p> <p>Organization type (check one):</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Family Foundation</td> <td><input type="checkbox"/> United Way</td> </tr> <tr> <td><input type="checkbox"/> Health Legacy Foundation or Funder</td> <td><input type="checkbox"/> Faith Organization</td> </tr> <tr> <td><input type="checkbox"/> Corporate Foundation/Giving Department</td> <td><input type="checkbox"/> Federated Fund</td> </tr> <tr> <td><input type="checkbox"/> Community Foundation</td> <td><input type="checkbox"/> Tax Supported Grantor</td> </tr> </table>		<input type="checkbox"/> Family Foundation	<input type="checkbox"/> United Way	<input type="checkbox"/> Health Legacy Foundation or Funder	<input type="checkbox"/> Faith Organization	<input type="checkbox"/> Corporate Foundation/Giving Department	<input type="checkbox"/> Federated Fund	<input type="checkbox"/> Community Foundation	<input type="checkbox"/> Tax Supported Grantor
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Signed:									

Financial Support – INVOICE/GRANT REQUEST

GPP depends upon the investments of member organizations to fulfill its mission. Dues are not required for membership, but members are encouraged to support the work of GPP by making a contribution to the operations of the association and/or by supporting special projects, initiatives, and meetings.

Guidelines for annual support for GPP are offered below and are calculated based on a funder’s annual giving in Greenville County. If your organization can provide financial support to GPP, *please use a copy of this form for your records as an invoice or grant request.*

Most recent fiscal year gifts/sponsorships	Guidelines for annual GPP support
\$50,000 - \$100,000	\$300
\$100,000 - \$150,000	\$500
\$150,000 - \$250,000	\$750
\$250,000 - \$500,000	\$1,000
\$500,000 - \$1,000,000	\$1,250
\$1,000,000 +	\$2,500

Amount provided
Date

Please return this form to Katy Smith, GPP, 531 S. Main Street, ML7, Greenville, SC 29601 or katysmith@greenvillephilanthropy.org. If you are providing financial support, enclose a check made out to Community Foundation of Greenville, or [pay online here](#). Acknowledgement of your payment will be provided as a receipt.