

Warren Zip Jones Fund Application

The Warren "Zip" Jones Fund was established in 2009 to help Davie County residents experiencing urgent, critical, life threatening, and / or terminal illnesses.

Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ (best number to reach you)

E-mail address: _____

Grant Amount Requested: _____

1. Please describe the medical condition below:

2. Please provide a detailed description of how grant funds will be used:

3. Please provide information regarding your current financial status.

4. Application must be accompanied by an affidavit from the attending physician(s).

Additional information may be requested by the committee.

Please return this application to the Davie Community Foundation.