

Cole's Pantry Inc.  
485 So. 24<sup>th</sup> St. West, Billings, MT 59102  
406-698-8986; colespantryinc.org  
Email: vkaufman@bridgerscouts.org

**Application for Start Up Funds – New Cole's Pantry Program**  
(Minimum Grant Amount \$1000)

Date: \_\_\_\_\_

Agreement between Cole's Pantry Inc. & (school and/or program name)

\_\_\_\_\_, Located at (address) \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Program Advisor \_\_\_\_\_.

1. Funds will be used to purchase food and toiletries to set up the program in the above named school.
2. The name Cole's Pantry will be used for the program, or included on program documentation should a different program name be used. (i.e. The Red Lodge program is called "Harvest Hope, with the name Cole's Pantry incorporated into the logo).
3. Recipient school will provide documentation of number of students served, frequency of food sent home, and pictures of program in action. Such documentation is due to Cole's Pantry Inc. by October 1<sup>st</sup> of each school year, recording information from the previous year and forecast needs for current academic year.
4. This is a startup grant for expenses and funds to implement the program. Supplemental grants will be available, however, the goal is for the program to become self-funding through donations, grants, and local fundraisers. Fundraising programs and support are available through Cole's Pantry Inc.
5. Existing Cole's Pantry programs (specifically the original program in Bridger) will be available for advice and counsel to set up and maintain the new program.
6. Above named school agrees to become available for advice and counsel to new Cole's Pantry programs after one year of experience in operating a Cole's Pantry program.
7. Cole's Pantry Inc. will pay a \$500 "Bounty grant" to each existing Cole's Pantry Program that recruits and brings aboard a new Cole's Pantry Program.

We understand and agree to these terms.

\_\_\_\_\_  
Cole's Pantry Advisor

\_\_\_\_\_  
School Principal or Superintendent

\_\_\_\_\_  
Amount Requested

\_\_\_\_\_  
Cole's Pantry Benefit Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Amount Approved

\_\_\_\_\_  
Number of Students Served