



Voucher Request

Agency Name: _____
Address: _____
City, State, Zip: _____
Phone#: _____

Contact: _____
Email: _____
Website: _____

Program description and direct services your organization provides and a detailed summary of how these vouchers will be used by your agency.

Agency Signature _____ Date _____

Please return application form with a copy of your agency's IRS 501c3 approval letter to

The Community Builder
Attn; Teresa Short
16433 Midland Blvd., 305
Nampa, ID 83687

or email application and IRS 501c3 approval letter to: info@thecommunitybuilder.org
include Community Cares Program in the subject field.