

**DORCHESTER COUNTY  
FY2026 BUDGET REQUEST FORM**



*Dorchester County Government is charged with being fiscally prudent  
with tax payer receipts and federal / state funding earmarks.*

**Entity Name:** \_\_\_\_\_ **EIN:** \_\_\_\_\_

**Physical Address:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Requestor's Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Attach the following:**

- Proof of good standing with the State of Maryland
- Last audited/unaudited yearly (includes 12 months) financial statements, including Balance Sheet, Income Statement (Profit Loss) and Budget.
- List of Board of Directors or Advisory Committee

**Funding Request**

Operating: \$ \_\_\_\_\_ Capital: \$ \_\_\_\_\_

Justification: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Will your organization augment the funding request with in-kind services or contract out for any additional resources needed? If so, please describe. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Proof of Community Building Mission**

a. How many people are intended to be served / impacted? \_\_\_\_\_

\_\_\_\_\_

b. What is the targeted population within Dorchester County? \_\_\_\_\_

\_\_\_\_\_

c. What is the intended outcome? \_\_\_\_\_

\_\_\_\_\_

d. How will the results be monitored for success or failure? \_\_\_\_\_

\_\_\_\_\_

**DEADLINE: 5:00PM ON FEBRUARY 28, 2025**