

## Jewish Non-Profit Agency Support Form

Date of submission to JFLA: \_\_\_\_\_

Full Legal Business Name: \_\_\_\_\_

Year & Month founded: \_\_\_\_\_

Service offered to the community: \_\_\_\_\_

\_\_\_\_\_

### Statement of Purpose

Who specifically is requesting the loan? \_\_\_\_\_

What is your relationship to the institution? \_\_\_\_\_

What will the loan be used for? Please be specific (proof of need will be required) \_\_\_\_\_

\_\_\_\_\_

### The Agency and Its Operations

How long has your agency been in existence? \_\_\_\_\_

Describe specifically the services that you provide. Describe the location and size of the facility. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Marketing

Does your agency charge for services rendered? \_\_\_\_\_

Describe your advertising and marketing plans. \_\_\_\_\_

\_\_\_\_\_

What client population do you serve? How many clients do you serve annually? \_\_\_\_\_



## Financial

(In addition to below, provide the current year-to-date and past 2 years profit & loss statements, year-end balance sheets and cash flow statements.)

Describe your insurance needs, and your current coverage. \_\_\_\_\_

\_\_\_\_\_

What are your additional sources of funding? \_\_\_\_\_

\_\_\_\_\_

## Agency Mission

What is the mission of your agency? \_\_\_\_\_

\_\_\_\_\_

Describe what makes your agency unique. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Appendix:** Please include the following with your cover sheet and questionnaire: Last 2 years of agency federal tax returns, last 2 years of agency state tax returns, last 6 months of business bank statements, reference letters and any other information you believe would strengthen your plan.