



4870 Sadler Road, Suite 300  
Richmond, VA 23060

[www.ctf.life](http://www.ctf.life)

## Instructions for Completing Letter of Inquiry (LOI) Form

1. For best results, download this form and complete the fields electronically. Sign completed form.
2. Please complete all fields on the form. (EIN/Tax ID is not applicable for individuals applying for scholarships – enter “NA” if desired or leave blank.)
3. A GuideStar Charity Check will be performed by CTF to ensure that your organization is a 501c3 organization.
4. Description of project: There is a 3000-character limit (including spaces) in the description fields. Keep your description clear and concise. If you are invited to apply, you will have the opportunity to provide more details including a budget.
5. LOIs may be submitted at any time and are reviewed by the Foundation throughout the year.
6. Submit your LOI by email to: [sdewberry@ctf.life](mailto:sdewberry@ctf.life).
7. Expect an email response regarding your LOI within 5-10 business days of submission.
8. If CTF invites you to apply for a grant, **the acceptance email will include additional instructions and the appropriate grant application.**
9. If you have any questions or problems completing the LOI, feel free to contact Susan Dewberry at [sdewberry@ctf.life](mailto:sdewberry@ctf.life) or call 804-934-0282, option #2.



**COMMONWEALTH  
TRANSFUSION  
FOUNDATION**

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## Letter of Inquiry

### Applicant Information

Primary Contact Name: \_\_\_\_\_ Date: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

*Mailing Address*

*City*

*State*

*ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Type of organization: Non-profit:

Other (explain): \_\_\_\_\_

EIN/Tax ID: \_\_\_\_\_

### Grant Information

Title of Project: \_\_\_\_\_

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

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

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

### Signature

*I certify that my answers are true and complete to the best of my knowledge.*

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



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### Description of Project



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### Description of Project