



Congresswoman
Rosa L. DeLauro
GRANTS INFORMATION

Mail or Fax To:
Congresswoman DeLauro's Office
Attention: Kimberly Junior
59 Elm Street, Suite 205
New Haven, CT 06510-2036
Tel: (203) 562-3718
Fax: (203) 772-2260

Please provide me with the following information, so that I may write a letter of support on your behalf. Please also submit a copy of a draft letter of support along with this form.

• **Agency Applying for Grant:** _____

• **Agency Contact Person:** _____

• **Agency Address:** _____

• **Agency Phone Number:** _____

• **Agency Email:** _____

• **Grantor Agency:** _____

• **Grantor Agency Address:** _____

• _____

• _____

• **Name/Title/Organization of the person the letter of support should be sent to:**

• **Date of Application:** _____

• **Any additional information:** _____

*** TO RECEIVE A LETTER OF SUPPORT, A SAMPLE LETTER MUST BE ATTACHED**