



**MCVB Grant Request – Letter of Inquiry**

**APPLICANT INFORMATION**

Organization Name: \_\_\_\_\_ EIN: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Website: \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Title: \_\_\_\_\_

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

**Project Title:** \_\_\_\_\_ **Total Amount Requested:** \_\_\_\_\_

**PROJECT DESCRIPTION** *(Please attach an additional page if needed)*

Empty box for project description.

**For Additional Information**

McKinney Convention & Visitors Bureau  
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