James C. Walker Motorist Grant Program Application

Please fill out each section as completely as possible. The application may be scanned and sent to the E-mail address provided above or mailed to the NMA at the mail address also shown above. If entries are handwritten, please make them legible. The “Fill and Sign” feature of Adobe Acrobat and other PDF viewing/editing programs provides a convenient method of typing in responses.

Program Goals:
1. Apply financial resources to local or regional projects that protect or further enhance drivers’ rights through the reform of traffic law and/or public policy
2. Extend NMA influence to a wider array of communities by encouraging citizens to get involved in drivers’ rights issues.

Program Guidelines:
1. Applicant must be a current supporting (dues-paying) member of the NMA or has donated at least $20 to the NMA or nonprofit NMA Foundation during the grant application year.
2. Grant funds may not be used to make donations to political candidates or parties.
3. Project management must be on a volunteer basis, i.e., grant funds cannot be used for payment of salaries or reimbursement of indirect overhead expenses.
4. Grant applications will be judged on overall beneficial impact on a range of drivers, on the chances that the proposed project will produce the desired results, and by a commitment by the applicant(s) to drive the project to completion.
5. The NMA Grant Review Board has final authority in approving grant awards, in determining grant size, and in approving project expenditures.

Project Overview
Project Title: __________________________

Specific Community Involved: __________________________

Grant Application Date: ____________ Funding Amount Requested, US$: ____________

Project Start Date: ____________ Estimated Completion Date: ____________

(please use mm/dd/yyyy format for all date entries)

Project Contact Info
Name of applicant: __________________________

Street Address: __________________________

City: __________________________ State: _______ Zip Code: _______

Telephone: __________________________ E-mail: __________________________

NMA Member Number (if applicable): __________________________
Project Details

Describe the scope of the project and its significance (principal objectives, who benefits, etc.):

Provide an estimated project timeline, highlighting key milestones:

Describe key obstacles that must be overcome (including opposition arguments) for the project to succeed:
Project Budget
Itemize the largest expected individual expenses on the first five lines, use the sixth line to sum up all remaining estimated expenses, and then total all six entries to determine the project budget. Compensation for time spent on the project, i.e., a salary, is not eligible for reimbursement, nor are general administrative overhead expenses.

<table>
<thead>
<tr>
<th>Description of Expense</th>
<th>Estimated Expense, US$</th>
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<tbody>
<tr>
<td>1.</td>
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<td>6. All other project expenses not included in the lines above</td>
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**Total Estimated Project Expenses**  

Please add any information that further supports your request for an NMA James C. Walker Motorist Grant: