

NONPROFIT NOMINATION FORM

As an eligible* member of Elk Rapids Area 100 Women Who Care, I nominate the following nonprofit organization to be considered for the group's next collective donation. I understand that the following information is true to the best of my knowledge and that the donation will be used in Antrim County.

*I have made my \$100 donation for the *previous* meeting's recipient.

THIS FORM MUST BE SUBMITTED AT LEAST 7 DAYS PRIOR TO THE MEETING.

I also agree to make a 5 minute presentation using the information provided below at the group's next meeting.

Email *

gloricrowell@gmail.com

MY NAME *

Glori Crowell

ORGANIZATION NAME *

The Manna Food Project

ORGANIZATION WEBSITE AND/OR FACEBOOK PAGE *

<https://www.mannafoodproject.org/> & <https://www.facebook.com/mannafoodproject>

MISSION/PURPOSE OF THE ORGANIZATION *

Manna Food Project (Manna), a 501(c) (3) non-profit organization, provides charitable food assistance to anyone experiencing food insecurity in Antrim, Charlevoix, and Emmet Counties. Over 300 committed volunteers, partnering with a staff of nine, work together to achieve our mission. Manna is a partner organization of the national Feeding America Food Bank Network. Manna operates a food bank (distribution center), a food rescue program, a weekly food pantry, and the Food 4 Kids backpack program. Manna also partners with community agencies and local businesses to host cooking classes and other events highlighting the importance of healthy, fresh food.

WHEN WAS THE ORGANIZATION ESTABLISHED? *

1987

SERVICE AREA THE ORGANIZATION SERVES (MUST INCLUDE ANTRIM COUNTY) *

Antrim, Charlevoix and Emmet counties

ANNUAL ORGANIZATION BUDGET AND PRIMARY FUNDING SOURCES *

Annual budget of \$2.26 million with all funding coming from individual donors, foundations, and business sponsors.

WHAT COMMUNITY NEED WOULD OUR DONATION HELP MEET? *

Funds from 100 Women Who Care-Elk Rapids will be used exclusively for the Food 4 Kids Program in Antrim County. This program bridges the "food gap" that the kids of Antrim County experience in the summer. During non-school months, kids no longer have access to the free breakfast and lunch that they get during the school year, so the Manna Food Project will provide supplemental food through the summer break to ensure that kids have enough to eat.

PROVIDE A DESCRIPTION OF HOW OUR GIFT WOULD BE UTILIZED. INCLUDE A SPECIFIC DOLLAR ESTIMATE AND TIMING OF IMPLEMENTATION. *

All 100WWC monies would stay within Antrim County and be used for the Food 4 Kids Program. This program provides children with a bag of kid-friendly foods to take home on Fridays during the school year. Each bag includes a variety of items to supplement breakfast, lunch and/or dinner, and plenty of snacks. Manna has offered to expand the program in Antrim County by providing packs through the summer months to assist children who might otherwise miss out on meals due to the summer break. From 2024 to 2025, Antrim County schools had a 10% increase in the number of kids enrolled in this food assistance program, the largest increase in Manna's three-county service area. In the first 4 months of 2026, they have already provided 10,100 bags of food just to Antrim County students, at an average cost of \$4.25 per backpack. As the number of kids in need has grown each year since 2022, there is no expected decrease in this demand, and Antrim County is expected to receive no less than 30,000 backpacks by the end of 2026 and serve at least 750 children per week. The timing of the May meeting of 100WWC would dovetail nicely with the beginning of the new summer backpack program in Elk Rapids!

MY RELATIONSHIP/EXPERIENCE WITH THIS ORGANIZATION *

I am part of an organization that provides supplemental food to the kids and adults in need in our community, so I see the need in our area and how hard Manna works to meet those needs. I am pleased to partner with Manna in any way possible to ensure that everyone in our community receives the food they need.

OPTIONAL ADDITIONAL INFORMATION

You may provide one additional document that helps support your request. Just email the document to 100womeneelkrapids@gmail.com, being sure to identify it as supporting a specific nomination, and it will be attached to this Nonprofit Nomination Form for viewing by our members on our website.

In the interest of brevity, please limit document length to two pages. Longer documents may not be posted.

ADMINISTRATIVE INFORMATION

Please complete information below that will be used for communication and funding purposes. It does NOT have to be included in your presentation.

ORGANIZATION'S TAX ID/501(c)3 NUMBER *

38-2764533

ORGANIZATION'S CONTACT PERSON *

Carrie Klingelsmith, Executive Director

CONTACT PERSON'S EMAIL ADDRESS *

cklingelsmith@mannafoodproject.org

ORGANIZATION'S STREET ADDRESS *

8791 McBride Park Court

ORGANIZATION'S CITY *

Harbor Springs

ORGANIZATION'S ZIP CODE *

49740

ORGANIZATION'S PHONE NUMBER *

(231) 347-8852

INITIAL SUBMISSION DATE *

MM DD YYYY

05 / 11 / 2026

REVISION DATE (Please provide this date for every revision you make. Use the "Initial Submission Date" above if this is your Initial Submission.) *

MM DD YYYY

05 / 11 / 2026

FORM SUBMISSION

Submit form by pressing the "Submit" button below.

Any questions, email 100womenelkrapids@gmail.com

THANK YOU FOR YOUR NOMINATION!

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