

CALIFORNIA WILDLIFE FOUNDATION

428 13th Street, Suite 10A
Oakland, California 94612



WWW.CALIFORNIAWILDLIFEFOUNDATION.ORG

tel 510.208.4436
fax 510.268.9948

California Wildlife Endowment Fund

Directions for completing the Endowment Investment Form

TO BE COMPLETED BY PROJECT SPONSOR:

Name of Endowment

Tell us the name of your project.

DFG Region

Indicate the region(s) in which the project is located.

Region 1 – Northern Region: Serving Del Norte, Humboldt, Lassen, Mendocino, Modoc, Shasta, Siskiyou, Tehama and Trinity counties

Region 2 – North Central Region: Serving Alpine, Amador, Butte, Calaveras, Colusa, El Dorado, Glenn, Lake, Nevada, Placer, Plumas, Sacramento*, San Joaquin*, Sierra, Sutter, Yolo* and Yuba counties

Region 3 – Bay Delta Region: Serving Alameda, Contra Costa, Marin, Napa, Sacramento*, San Mateo, Santa Clara, Santa Cruz, San Francisco, San Joaquin*, Solano, Sonoma and Yolo* counties

** Note: Those portions of Sacramento, San Joaquin and Yolo counties that are south of I-80 and west of I-5 are in Region 3; the balance of those counties are in Region 2. See <http://dfg.ca.gov/regions/images/reg-2-3-detail.jpg> for more detail.*

Region 4 – Central Region: Serving Fresno, Kern, Kings, Madera, Mariposa, Merced, Monterey, San Benito, San Luis Obispo, Stanislaus, Tulare and Tuolumne counties

Region 5 – South Coast Region: Serving Los Angeles, Orange, San Diego, Santa Barbara and Ventura counties

Region 6 – Inland Deserts Region: Serving Imperial, Inyo, Mono, Riverside and San Bernardino counties

Region 7 – Marine Region: Serving the entire California Coastline from border to border and three nautical miles out to sea

Primary Contact Person

This should be the person at DFG or other agency that CWF will work with to establish and manage the project. This agency representative should have authority to sign off on DFG mitigation and permitted projects.

Title

List the Primary Contact Person's job title.

Telephone

List the Primary Contact Person's telephone number.

Fax

List the Primary Contact Person's fax number.

Email

List the Primary Contact Person's email address.

Primary contact organization

List the organization that the Primary Contact Person works for.

Street Address, City, State, Zip

List the physical address for the Primary Contact Person's organization. Use space under Additional Comments on the second page of the form to indicate a mailing address, if different from physical address.

PROPERTY

Location

Indicate the location of the property within its City or County.

City and/or County

Indicate the City, if located on incorporated land, or the County in which the project is located.

Description

Property description from recorded deed. Please also provide total acreage.

FUNDING

Total Amount of Endowment

Indicate the full amount of the endowment being transferred to CWF.

Primary Source

Tell us which person or organization will be providing the funding for the project.

Secondary Source

If funding is to come from more than one source, please indicate the source.

Preferred Annual Disbursement Date

You may choose to receive your project's annual disbursement in either January or June. Please indicate your preference.

Agency-approved initial annual disbursement

List the amount that DFG or other agency has approved for CWF's initial annual distribution to DFG for the project.

CWF initial fee (1%)

The amount listed here should be 1% of the amount listed in Total Amount of Endowment. (This amount should not be included as part of the Total Amount of the Endowment, above.)

Date submitted

List the date you are submitting this form to CWF.

Additional Comments

Give us any additional information about the project that you feel would be helpful to know. You may also use this space to indicate the Primary Contact Person's mailing address, if different from the organization's physical address.