

NEW JERSEY DEPARTMENT OF AGRICULTURE  
APPLICATION FOR CHARITY RACING DAY MONEY

The undersigned hereby applies for funds to be used for the care and placement in new homes of retired racehorses during the calendar year 2026

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ORGANIZATION \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_

VENDOR FEDERAL ID NUMBER \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

- X Description of how the funds will be used, specifically how they will benefit retired racehorses and the New Jersey Equine Industry, including estimates of the number of animals and/or people positively impacted as a result of the funds.
- X Description of organization and its mission

Please return this application by March 15, 2026 to the New Jersey Department of Agriculture, P.O. Box 330, Trenton, New Jersey 08625 - att. Equine Programs

New Jersey Department of Agriculture  
Affidavit of Performance

The undersigned hereby acknowledges the receipt of \_\_\_\_\_ on or about \_\_\_\_\_ from the New Jersey Department of Agriculture to be used for the Horse Park of New Jersey or organizations that care for retired race horses.

The undersigned attests that these funds were expended for the following programs:

The following is an itemization of all expenditures directly incurred with the use of the Charity Racing Day money. ATTACH PAID INVOICES, CANCELED CHECKS OR OTHER RECEIPTS which show your total expenditures. (Attach additional sheets as required)

Organization \_\_\_\_\_

Address \_\_\_\_\_

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

Signature \_\_\_\_\_ Title \_\_\_\_\_

Subscribed and sworn to before me

this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_

\_\_\_\_\_  
Notary Public of New Jersey

Return this form before December 31, 2025, to NJ Department of Agriculture, Division of Markets, P.O. Box 330, Trenton, New Jersey 08625-0330.