

SEATTLE CHAPTER AGO

Application for SPAC funding (SPECIAL PROJECTS ADVISORY COMMITTEE)

\_\_\_\_\_  
Name of Applicant or Sponsoring Organization

\$ \_\_\_\_\_  
Amount Requested

\_\_\_\_\_  
Date(s) funds to be used

\_\_\_\_\_  
Date funds needed

\_\_\_\_\_  
Place funds to be used

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

(\_\_\_\_) \_\_\_\_\_  
Telephone

\_\_\_\_\_  
E-mail or website

Purpose of request/project *(This is a simple statement of purpose – not a complete description of project/request.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature (Representative)

\_\_\_\_\_  
Date