****

**ADDITIONAL FUNDING REQUEST FORM**

* The purpose of Additional Funding is to help Councils with their P&E Events and training, when there is not enough money in that Council to fund it completely themselves.
* In order to provide accountability of spending to the OUNC, additional information is required. Please fill out this form as completely as you are able to.

The OUCC requests the following information from you.

Requesting Council:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Zone 1 | [ ]  North Coast | [ ]  Metropolitan | [ ]  Mid-Willamette | [ ]  Yamhill |
| Zone 2 | [ ]  Lincoln County | [ ]  Linn-Benton | [ ]  East Linn | [ ]  Lane |
| Zone 3 | [ ]  Douglas County | [ ]  South Coast | [ ]  Rogue Basin | [ ]  Klamath |
| Zone 4 | [ ]  Hood River | [ ]  Wasco County | [ ]  Central Oregon |  |
| Zone 5 | [ ]  Umatilla, Morrow, Gilliam Counties | [ ]  La Grande / Union | [ ]  Baker County | [ ]  Malheur (Ontario, Vale, Nyssa) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

|  |  |
| --- | --- |
| Today’s Date:      Office(s) held:[ ]  President [ ]  Vice President [ ]  Treasurer[ ]  Secretary [ ]  Damage Chair [ ]  P&E Chair[ ]  Standards Chair [ ]  Other       | Name of Person Requesting Funding:      Mailing Address:      City / State / Zip:       |

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

Event or Purpose for Request (with description):

Date of Event:       Location of Event:

Is there a web link to this event? [ ]  No [ ]  Yes -

Can it be added to the OUCC Calendar? [ ]  No [ ]  Yes

Are you requesting other promotional materials?

[ ]  No [ ]  Yes :

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

Amount of funds in your UCC account prior to this event/training: $

Amount of Request: $       Amount your UCC is contributing: $

Please list any additional events you plan to sponsor through the rest of this year with estimated expenditure:

|  |  |  |
| --- | --- | --- |
| $      | Date:       | Event:       |
| $      | Date:       | Event:       |
| $      | Date:       | Event:       |
| $      | Date:       | Event:       |

Please submit your request to the Treasurer at alba.vogland.oucc@gmail.com for Board review and approval.