

Request Memorandum
Silver Bay Council Allocations Committee
2008-2009

Date of Request: _____

Request Made By: _____

Contact Information for Person or Department Making Request:

Tel: _____, Ext.: _____

E-Mail: _____

Mailing Address: _____

Alternate Contact Person(s): _____

Amount of the Request: \$ _____

Purpose of the Requested Funds:

Person, Department, Agency or Organization to Actually Receive Requested Funds:

Anticipated Completion Date of Project, Program or Purchase: _____

Person to Have Oversight Responsibility for

This Project or Purchase: _____

The person who may be completing this form may not be the actual party to receive the requested funds. Any member can request funding on behalf of an administrative department, for example, or for a program to be executed by others. The Council Allocations Committee will contact those who would receive the funding.

The Council Allocations Committee does not allocate funds. This Committee receives each request, examines and clarifies the purpose, and determines whether it is appropriate to present to the full Council for a vote. A simple majority vote, usually taken during the August meeting, is required to allocate Council funds.

Please forward this form to Sylvie Richards, Chair, Allocations Committee

710 West End Ave.

Apt. 16C

NY, NY 10025

nysylvie@aol.com

or deliver to any Council officer.