## Application for Financial Support for a Project (To be submitted to AfB Board for approval)

Name of Person Making Request:	Date:
Address of Person Making Request:	
Talanhana #:	ail addragg:
Telephone #: E-ma If making a request on behalf of another, please na	ame of that person or organization:
if making a request on behalf of another, please no	and of that person of organization.
Location of Project:	
Please give a description of the project (include ar	n attachment if necessary):
Amount being requested:	ed in the project (add a supplemental
. · · · · · · · · · · · · · · · · · · ·	\$
	 \$
Who will administer the funds? How and to whom should the funds be dispensed? transfer, give acct. #s)	(e.g. Western Union, bank wire
When is it proposed that the project start?	
Who will be doing the work?	
When the project is completed you will need to with receipts for the money spent and a picture Directors, PO Box 1058, Santa Barbara, Ca 93	of the project to: AfB Board of
(For AfB Board Use Only)	
This project was approved by AfB Board mer	mbers (names)
	on
This project is not approved because:	
Further documentation needed:	
Signed:	
Sponsor/Source of funding:	
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