

SOUTHWESTERN WATER CONSERVATION DISTRICT

Request for Financial Assistance – Sponsorship/Donation

Requests are reviewed by the Board of Directors at their February, June, and October meetings

DESCRIPTION OF ORGANIZATION/EVENT

Name of Organization/Event: _____

Location of Organization/Event: _____

Purpose of the Organization/Event: _____

AMOUNT OF REQUEST AND HISTORY OF SPONSORSHIP

What is the amount of your request? _____

Have you requested and received financial support from SWCD in the past? If so, please provide 2-3 years of history.

<u>YEAR</u>	<u>AMOUNT</u>
_____	_____
_____	_____
_____	_____

DESCRIPTION OF REQUESTING ENTITY

Contact Name: _____

Position/Title: _____

Address: _____

Phone Number: _____ Fax Number: _____

Email Address: _____

Type of Entity (please check one):

- Public Entity Non-profit Corporation
 Not-for-Profit Corporation Cooperative Association
 Other _____

*Send your request to SWCD, 841 E. 2nd Avenue, Durango, CO 81301 or
janem@southwesternwater.org*

SWCD USE ONLY:

Approved: (yes or no) _____

Check #: _____ Account Code: _____

Date Mailed: _____