

**PEOPLE HELPING PEOPLE PROGRAM**

**APPLICATION FORM 2020**

**(Due in ADVANCE of event, No. 8 or 9 on Structure Graph)**

The Society name and number must be clearly identified as the sponsor in all publicity and Society members must actively be involved in project.

Society Number \_\_\_\_\_ Name \_\_\_\_\_ City \_\_\_\_\_

Event	Date	Location	Recipient of Funds
1.			
2.			
3.			

Please write corresponding number to the type of project, than circle Community or Parish.

\_\_\_\_\_ Community/Parish Fund Raiser (50% of funds raised will be matched up to \$1,000)

\_\_\_\_\_ Community/Parish Work Project (Up to \$250 reimbursed for supplies per year)

\_\_\_\_\_ Community/Parish Disaster Relief (100% of funds will be matched up to \$1,000)

\_\_\_\_\_  
Signature of Society Officer

\_\_\_\_\_  
Date

<b>State Office Use Only</b>	
<input type="checkbox"/> Request approved	
<input type="checkbox"/> Request denied	
_____ Signature of President/CEO	_____ Date