**Donation worksheet**

**Donation Worksheet |** Please Indicate Area and Amount of Support

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | |  |  |  |  | | --- | --- | --- | --- | | **Fiscal Year 2021 – Financial Need** | | | | | **$44,000** | | | | | **SELECTION** | | **AMOUNT** | **NAME AND PAYMENT METHOD** | |  | **Subscriptions** | |  | |  | **Full Support/Sponsor** | $ 526.66 | |  | **Partial Support | Indicate Amount** | **$** | |  | **Space Rentals** | |  | |  | **Full Support/Sponsor** | $ 7,500 | |  | **Partial Support | Indicate Amount** | **$** | |  | **Marketing Tools** | |  | |  | **Full Support/Sponsor** | $ **1,000** | |  | **Partial Support | Indicate Amount** | **$** | |  | **Resale Invest Capital** | |  | |  | **Full Support/Sponsor** | $ **3,000** | |  | **Partial Support | Indicate Amount** | **$** | |  | **Committee Operation** | |  | |  | **Full Support/Sponsor** | $ **20,000** | |  | **Partial Support | Indicate Amount** | **$** | |  | **Operational Honoraria** | |  | |  | **Full Support/Sponsor** | $ **9,333.34** | |  | **Partial Support | Indicate Amount** | **$** | |  | **Document Filing Services** | |  | |  | **Full Support/Sponsor** | $ **1,000** | |  | **Partial Support | Indicate Amount** | **$** | |  | **Policy & Liability Coverages** | |  | |  | **Full Support/Sponsor** | $ **1,140** | |  | **Partial Support | Indicate Amount** | **$** | |  | | | | |

**Itemized Financial Request | Yearly Proposed Need**

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